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Master in Occupational Therapy Programme Requirement Document (2021-2022 Cohort)

THE HONG KONG POLYTECHNIC UNIVERSITY
香港理工大學

康復治療科學系
Department of Rehabilitation Sciences

MASTER IN OCCUPATIONAL THERAPY (MOT)

PROGRAMME REQUIREMENT DOCUMENT

This document applies to 2021-2022 Cohort
Course Code 51068

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This Programme Requirement Document is subject to review and changes which the Department of Rehabilitation Sciences can decide to make from time to time. Students will be informed of the changes as and when appropriate.

OUR VISION:

We strive for excellence in education, research and consultancy that enables occupations, i.e. self-maintenance, leisure and work for people with disabilities and facilitate their participation in families and communities in Hong Kong. We educate our students the intervention techniques strategies that help clients to eliminate or minimize disability and handicap, promote health and prevent disability. We aim to be recognized as the preferred occupational therapy programme both locally and internationally, to lead the way to the application of our professional knowledge and skills in the cultural context.

OUR MISSION:

- To provide undergraduate, post-graduate and continuing education programmes that are based on the theories of enabling occupation, and equalization of participation for all members of the community. Our graduates will be committed to life-long learning, the education of their clients, the public and the next generation of therapists.

- To actively nurture a culture of scholarship, open inquiry, research, and partnership through linkages with people with disabilities, clinical & academic colleagues and the international community.

- To contribute to the future direction of occupational therapy education, research and professional development in Hong Kong.

- To promote equality of access to our University for all students and to become known as a Preferred University for students with disabilities.

- To identify areas of need and develop speciality services that will serve the Hong Kong community.

- To strengthen formal and informal links with colleagues and organizations in China and support the development of services for people with disabilities and the occupational therapy profession including clinical service, education and research.

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PART A

PROGRAMME INFORMATION

1. INTRODUCTION

Like most developed countries, Hong Kong is facing the problem of an aging population (Census and Statistics Department, HKSAR). Going hand-in-hand with ageing problems will an associated increase in dementia and chronic illness (e.g. cancer, stroke, heart disease, arthritis). Occupational therapists working in different countries, including Hong Kong, have been playing an increasingly important role in community-based rehabilitation and partnership with different stakeholders in improving clients' quality of life.

Nowadays, occupational therapy practice is no longer limited to medical institutions, but across a continuum of care. Therefore, there is an increasing need for the students to learn and develop the skills essential to become a competent health care professional in the context of the changing health care system. In many community settings, the occupational therapists may be required to play the role of a sole occupational therapist in-charge. The requirements on management, networking, organizational, and therapy skills are even higher in these cases (Twible & Henley, 2000).

Moreover, there has been an increasing emphasis on evidence-based practice in both curriculum development and clinical practice in OT (Addy, 2006; Burry, 1998). With the change in population demographics, occupational therapists will be faced with increasingly complex patient conditions. A Master's entry to practice curriculum is necessary to deal with these new challenges. To date, the world trend in the education of occupational therapists (OT) is Master entry. Entry level master level refers to professional education at the master's level. For examples: Master entry programs in North America are all master entry for OT and even doctoral degree (e.g. Pittsburg University). In Canada, similar master entry for OT (e.g. University of British Columbia) is launched. In Australia, Master degree in OT (e.g. The University of Sydney) will be offered to holders of a Bachelor degree. Running of MOT programme may provide an alternative pathway for those first degree university graduates with health care background for career change.

To further address the local long-term severe shortage in OT manpower, voiced strongly in non-government agencies (NGOs), request has been given from University Grant Council (UGC) to The Hong Kong Polytechnic University (PolyU) to increase student intake of UGC funded undergraduate OT programmes in the 2012-2015 triennium. Another possible way is for PolyU to launch blister entry-level programme in occupational therapy on a self-financed mode which can produce the graduates by 2014 and years onward. The initiative to launch the MOT programme had been further discussed in the Advisory Committee Meeting of the Department. All members supported the initiative of launching the blister MOT programme for tackling the existing manpower shortage problems, particularly in NGOs and community settings. The Department hereby has been implementing a 2-year Master-entry programme in Occupational Therapy. Successful applicants to the MOT programme will be drawn from those who have already obtained a Bachelor Degree. The MOT programme will be funded by the Social Welfare Department. In exchange, the students are required to commit themselves in working as an occupational therapist in a particular NGO for at least 3 years.

2. PROGRAMME INFORMATION

Programme Title	:	Master in Occupational Therapy 職業治療學碩士
Mode of attendance	:	Full-time
Student Intakes	:	48
Normal Duration	:	2 years
Credit Value	:	90 credits* (66 academic credits, 24 clinical education credits)
Award	:	Master in Occupational Therapy

3. HOST DEPARTMENT

This MOT programme will be hosted by the Department of Rehabilitation Science of PolyU. The Department is fully responsible for the design of the curriculum, teaching the professional and clinical subjects, implementation of assessment for students.

AIMS , INSTITUTIONAL AND PROGRAMME INTENDED LEARNING OUTCOMES OF THE PROGRAMME

3.1 The **overall aim of the programme** is to equip the students to become qualified occupational therapists who can practice occupational therapy autonomously, safely and effectively in different settings, and to quickly meet the societal need in NGOs.

3.2 The programme aims to:

(a) To provide students with professional education programme that is based on theories of occupation, client-centred practice and equalization of opportunities for all members of the community. Our graduates will be committed to life-long learning, the education of their clients, the public and the next generation of therapists.
(b) To actively nurture a culture of scholarship, open inquiry, research, and partnership through linkages with people with disabilities, clinical colleagues and the local and international community.
(c) To contribute to the future direction of rehabilitation services, policies and innovations in Hong Kong.
(d) To strengthen formal and informal links with colleagues and organizations in China to support the development of services for people with disabilities and the occupational therapy profession including clinical service, education and research.

3.3 Institutional Learning Outcomes (Taught Postgraduate)

3.3.1 Three learning outcomes are believed to be broadly applicable to all taught postgraduate programmes – all graduates of taught postgraduate programmes are expected to be able to demonstrate professional competence, strategic thinking, and lifelong learning capability. Sections 3.3.2 to 3.3.4 articulate the expected level of attainment of these learning outcomes for graduates of taught postgraduate programmes. Where appropriate, programmes are expected to contextualise the learning outcomes so that they become a meaningful and integral part of the learning experience that a student would gain through the programme.

3.3.2 **Professional competence of specialists/leaders of a discipline/profession:** Graduates of PolyU taught postgraduate programmes will possess in-depth knowledge and skills in their area of study and be able to apply their knowledge and contribute to professional leadership.

3.3.3 **Strategic thinking:** Graduates of PolyU taught postgraduate programmes will be able to think holistically and analytically in dealing with complex problems and situations pertinent to their professional practice. They will be versatile problem solvers with good mastery of critical and creative thinking skills, who can generate practical and innovative solutions.

3.3.4 **Lifelong learning capability:** Graduates of PolyU taught postgraduate programmes will have an enhanced capability for continual professional development through inquiry and reflection on professional practice.

3.4 Programme Intended learning outcomes (PILOs)

Upon completion of study in the Master in Occupational Therapy (MOT) programme, the graduate will be able to:

Regarding patient/client care

<u>Professional/academic knowledge and skills</u>

i. Synthesise current biological, behavioural, social and clinical sciences for occupational therapy practice with due reference to the holistic approach in health care issues.
ii. Identify patients'/clients functional problem resulting from development dysfunction, physical dysfunction, psychosocial dysfunction and /or ageing process, plan, and provide quality and evidence-based OT programmes to help them fulfil own life roles and function independently in the community.
iii. Contribute to the planning, organising, managing, leading and assuring the quality of services of an occupational therapy unit.
iv. Understanding the local and international health and labour policies and trend, identify market needs for OT services, and engage in service development and public education for Hong Kong and mainland China.
v. Effectively use English/Chinese (verbal and written) to communicate and interact effectively with clients, care-givers, peers, colleagues and other health care professionals with clarity and sensitivity in professional manner.

vi. Effectively use interpersonal skills to enhance treatment process and reduce mis-understanding and conflict among peers, patients, care-givers and team members.
vii. Continue ongoing and professional development through participation in professional conferences, workshops, postgraduate studies so as to keep abreast of local and internal professional and technological developments in particular the field of rehabilitation.

Regarding attributes for all-roundedness

1. Demonstrate leadership skills in student organizations, social functions, outside visits to demonstrate the leadership.
2. Translate ethical principles into responsible and accountable behaviour and exhibit appropriate personal and professional conduct.
3. Act as responsible citizens fulfilling social and civic duties to promote quality of life among people with disabilities in Hong Kong and China.

3.5 Relationship between Institutional Learning Outcomes (ILOs) and Programme Intended Learning Outcomes (PILOs):

Programme Intended Learning Outcomes	Institutional Learning Outcomes for Graduates at Taught Postgraduate Degree Level		
	Professional competence of specialists/leaders of a discipline/profession	Strategic thinking	Lifelong learning capability
PILO (1)	√	√	
PILO (2)	√	√	
PILO (3)	√	√	
PILO (4)		√	
PILO (5)	√	√	
PILO (6)	√	√	
PILO (7)	√		√

4. PROGRAMME STRUCTURE

This is a 2-year professional programme based on a structured credit-earning model. The programme consists of a total of 90 credits to be covered in 6 semesters. The credits are divided into 23 foundation credits, 43 professional credits and 24 clinical credits (Table 1).

The design of this programme is such that all essential occupational therapy professional and clinical knowledge is covered in the curriculum. The science subjects are of advanced levels and there is a research and investigative component which provides the students with the inquiry skills required for evidence-based practice upon graduation. Such a design of curriculum follows the norm for most master entry level occupational therapy programmes in North American and Australian universities.

Teaching in semester one will focus on the foundation/ clinical sciences subjects. Semester two will focus on OT theories and processes, occupational therapy in musculoskeletal condition whereas the semester three will teach on medical, neurological and psychiatric conditions. Developmental disabilities and environmental issues in OT practice will be covered in semester four. Fifth and sixth semesters will cover vocational rehabilitation and health care management issues respectively. Clinical placement will be arranged in two years.

TABLE 1 CREDIT ALLOCATIONS BY REQUIRED SUBJECT CATEGORIES

Basic and Clinical Science Subjects	***Credit***
RS5308 Functional Anatomy	2
RS5302 Clinical Neuroscience and Neurology	3
RS5305 Rehabilitation Psychology	3
RS5351 Clinical Sciences in Developmental Conditions	2
RS5352 Clinical Sciences in Musculoskeletal Conditions	3
RS5353 Clinical Sciences in Medical and Neurological Conditions	3
RS5354 Clinical Sciences in Psychiatric Conditions	4
RS5303 Research Methods and Statistics	3
Total	***23***

Professional Subjects	***Credit***
RS5358 Human Occupations	4
RS5356 OT Theory and Process I	3
RS5357 OT Theory and Process II	3
RS5355 OT Foundations in Human Performance	4
RS5359 OT for Developmental Dysfunction	3
RS5360 OT for Physical Dysfunction I (Musculoskeletal Conditions)	4
RS5361 OT for Physical Dysfunction II (Medical and Neurological Conditions)	3
RS5362 OT for Psychosocial Dysfunction	4
RS5363 OT Management in Geriatric Practice	3
RS5364 Occupational Therapy and Vocational Rehabilitation	3
RS5366 Environmental Issues in OT Practice	3
RS5323 Administration and Management	3
RS5324 Research Project	3
Total	***43***

Clinical Education Subjects	***Credit***
RS5371 Clinical Education I	3
RS5372 Clinical Education II	7
RS5373 Clinical Education III	7
RS5374 Clinical Education IV	7
Total	***24***

5. PROGRAMME CURRICULUM

5.1 Outline of programme curriculum

The outline of curriculum for this programme and the sequence of the subjects are shown in Table 2. The teaching activities and the assessment type are shown in Table 3.

The detailed description of each subject can be referred to Subject Description Forms. Details of the syllabi showing subject title, credit value, subject contact hours, learning approach, objectives, intended learning outcomes, content, assessment method and references for the programme are shown in each stage of the programme are shown in each stage of the programme outline booklets.

Another Clinical Education Manual contains pertinent information on clinical education, including philosophy, aims and objectives, integration with academic teaching, teaching-learning methods, assessment, policies and procedures, and the expected roles of the relevant parties.

A curriculum map is presented in Appendix 2. This helps to clarify learning goals for students and give them an overall picture of the programme intended outcomes. It also enables students to learn about the opportunities available in the programme through which they can develop academically, professionally and personally, so that they can better manage their learning. It is important to emphasize that students are expected to be active and motivated learner towards the achievement of these learning outcomes as listed in Section 3.3.

TABLE 2 ORGANIZATION OF ACADEMIC & CLINICAL EDUCATION – MASTER IN OCCUPATIONAL THERAPY

YEAR 1

1st Semester **Semester 2, 2021/22 Academic Year**		**2nd Semester** **Semester 3, 2021/22 Academic Year**		**3rd Semester** **Semester 1, 2022/23 Academic Year**	
13 weeks		*13 weeks*		*13 weeks*	
Course	*Cr*	*Course*	*Cr*	*Course*	*Cr*
RS5308 Functional Anatomy	*2*	RS5352 Clinical Sciences in Musculoskeletal Conditions	*3*	RS5357 OT Theory and Process II	*3*
RS5358 Human Occupations	*4*	RS5360 OT for Physical Dysfunction I (Musculoskeletal Conditions)	*4*	RS5354 Clinical Sciences in Psychiatric Conditions	*4*
RS5355 OT Foundations in Human Performance	*4*	RS5303 Research Methods and Statistics	*3*	RS5362 OT for Psychosocial Dysfunction	*4*
RS5356 OT Theory and Process I	*3*	RS5351 Clinical Sciences in Developmental Conditions	*2*	*RS5372 CE-II (280 hours)*	*7*
RS5302 Clinical Neuroscience and Neurology	*3*	RS5305 Rehabilitation Psychology	*3*		
		RS5371 CE- I (175 hours)	*3*		
TOTAL NO. OF CREDITS	***16***		***18***		***18***
				RS5324 Research Project (Phase I: Formulation of Research Topic)	

YEAR 2

4th Semester **Semester 2, 2022/23 Academic Year**		**5th Semester** **Semester 3, 2022/23 Academic Year**		**6th Semester** **Semester 1, 2023/24 Academic Year**			
13 weeks		*13 weeks*		*16 weeks*			
Course	*Cr*	*Course*	*Cr*	*Course*	*Cr*	*Course*	*Cr*
RS5359 OT for Developmental Dysfunction	*3*	RS5364 Occupational Therapy and Vocational Rehabilitation	*3*	RS5324 Research Project	*3*	*RS5373 CE-III (280 hours)*	*7*
RS5361 OT for Physical Dysfunction II (Medical and Neurological Conditions)	*3*	RS5363 OT management in Geriatric Practice	*3*				
RS5353 Clinical Sciences in Medical and Neurological Conditions	*3*	RS5323 Administration and Management	*3*			*RS5374 CE-IV (280 hours)*	*7*
RS5366 Environmental Issues in OT practice	*3*						
RS5324 Research Project (Phase II: Data Collection and Analysis)				*RS5324 Research Project (Phase III: Oral Presentation and Written Report)*			
TOTAL NO. OF CREDITS	***12***		***9***				***17***

TABLE 3 TEACHING ACTIVITIES AND ASSESSMENT TYPE PLAN

Subject	*Credit*	*Teaching Activities Hours*					*Assessment %*	
		Lec	*Tut/ Sem*	*Practical/ Lab/ Fieldwork*	*Clinical Placement/ CV*	*Sub-total*	*CA*	*Exam*
Basic and Clinical Science Subjects								
RS5302 Clinical Neuroscience & Neurology	3	36		5		*41*	100	
RS5303 Research Methods and Statistics	3		9	22		*31*	100	
RS5305 Rehabilitation Psychology	3	26	14			*40*	100	
RS5308 Functional Anatomy	2	10	36			*46*	60	40
RS5351 Clinical Sciences in Developmental conditions	2	18	10		6	*34*	100	
RS5352 Clinical Sciences in Musculoskeletal conditions	3	28	14			*42*	100	
RS5353 Clinical Sciences in Medical & Neurological Conditions	3	35				*35*	100	
RS5354 Clinical Sciences in Psychiatric Conditions	4	38	18			*56*	100	
Professional Subjects								
RS5355 OT Foundations in Human Performance	4	28	28	6		*62*	100	
RS5356 OT Theory and Process I	3	28	14			*42*	55	45
RS5357 OT Theory and Process II	3	14	28			*42*	50	50
RS5358 Human Occupations	4	28	28			*56*	60	40
RS5359 OT for Developmental Dysfunction	3	24	20	6		*50*	60	40
RS5360 OT for Physical Dysfunction I (Musculoskeletal Conditions)	4	26	4	52		*82*	60	40
RS5361 OT for Physical Dysfunction II (Medical & Neuro-Rehabilitation)	3	20	16		14	*50*	60	40
RS5362 OT for Psychosocial Dysfunction	4	28	28		4	*60*	60	40
RS5363 OT Management in Geriatric Practice	3	14	20		8	*42*	60	40
RS5364 Occupational Therapy and Vocational Rehabilitation	3	14	22	6		*42*	60	40
RS5366 Environmental Issues in OT Practice	3	28	24		4	*56*	100	

Subject	*Credit*	*Teaching Activities Hours*					*Assessment %*	
		Lec	*Tut/ Sem*	*Practical/ Lab/ Fieldwork*	*Clinical Placement/ CV*	*Sub-total*	*CA*	*Exam*
RS5323 Administration and Management	3	16	18	5		*39*	100	
RS5324 Research Project	3		14			*14*	100	

Clinical Education Subjects*

RS5371 Clinical Education I #	3				175	*175*	100	
RS5372 Clinical Education II	7				280	*280*	100	
RS5373 Clinical Education III	7				280	*280*	100	
RS5374 Clinical Education IV	7				280	*280*	100	

Explanatory notes for the MOT Programme Teaching Activities and Assessment Type Plan:

a. "Lec" means "Lectures"
b. "Sem" means "Seminars"
c. "Tut" means "Tutorials"
d. "Lab" means " Laboratory"
e. "SubT." means "Sub-total"
f. "CV" means clinical visit
g. "CA" means "Continuous Assessment"
h. "Exam" means "Examination"

*Clinical teaching hours have been embedded in clinical subjects in the form of clinical visit, open laboratory or practical sessions as follow:

RS5351 - 6 hours
RS5359 - 6 hours
RS5361 - 14 hours
RS5362 - 4 hours
RS5363 - 8 hours
RS5364 - 6 hours
RS5366 - 4 hours
RS5360 - 30 hours (as extra student effort in clinical skill open lab/fieldwork practice)
Subtotal hours=78

Clinical hours of CEI, II, III and IV= 1015 hours

Total clinical hours= (1015+78) = 1093 hours

#CEI composes of 1-week primary health project led by PolyU faculty members, and another 4 weeks of therapists-led clinical visits to different, major hospital and NGO settings

5.2 Programme Management

5.2.1 Critical Mass of Faculty Members

The Department of Rehabilitation Sciences has a critical mass of staff with excellent teaching experience, research track record, and clinical expertise to provide occupational therapy education at the Master level. Please refer to the enclosed curriculum vitae of the individual teaching staff members for details.

Moreover, the teaching material is underpinned by the latest research findings (i.e. evidence-based teaching). For example, the subject team of the course entitled "RS5362 OT for Physical Dysfunction II (Medical and Neurological Conditions) "has been conducting research in cognitive performance in both young and older adults with acquired brain injury; "RS5363 OT Management in Geriatric Practice" has been research on dementia assessment and intervention issues. The published research findings on cognitive and dementia will then be used in preparing the teaching material, in order to instill the concept of evidence-based practice.

5.2.2 Infrastructure

The Department has state-of-the-art teaching and research laboratories to support teaching and learning activities for each of the core areas of occupational therapy practice, including neurological, mental, vocational and paediatric rehabilitation.
Research laboratory facilities (located in both GH and ST wing) that cover the research themes on "Neuroscience, Neuroplasticity and Cognitive rehabilitation", "Psychosocial rehabilitation, health and well-being" include:

- Burns rehabilitation laboratory
- Applied Neuroscience Laboratory
- Applied Cognitive Neuroscience Laboratory
- Cognitive and Neuro-rehabilitation Laboratory

There are teaching laboratories (located in GH wing), which are well equipped with instruments required for related training on assessment and treatment modalities:

- Hand Rehabilitation Research Laboratory
- Psychosocial Rehabilitation Laboratory
- Ergonomics and Work Rehabilitation Laboratory
- Rehabilitation Informatics Laboratory
- Pediatric Rehabilitation Laboratory
- Neuro-rehabilitation Laboratory
- Functional Rehabilitation Laboratory

- Simulated Living Laboratory
- Practical Workshop

5.2.3 Budget

The tuition fee is $640,000 in total for the 2-year programme. Successful applicant may apply for the sponsorship offered by non-government organizations (NGOs) for covering the tuition fee in full. A maximum of 48 sponsorship quota will be offered with the condition that the MOT graduates are required to undertake a commitment to serve as an occupational therapist at the sponsoring NGO for no less than 3 years. Those students who do not apply for the scholarship will be self-financed and required to pay a tuition fee totaling $640,000.

5.2.4 Stakeholders' Input and Quality Assurance

Several mechanisms will be put in place to ensure the ongoing quality of programme. Firstly, the issues related to the operation of the MOT programme will be discussed in the Entry Level Master Programme Committee meeting, which is usually held twice a year.

The Committee consists of not only the representatives from the Faculty, but also those from important stakeholders such as employers, practicing clinicians and students. Secondly, student-staff consultation meetings will be held in the middle of each semester. The meetings will be attended by the MOT Programme Leader, student representatives, and subject leaders. In these meetings, the subject leaders will report on the operation of their subjects, the student representatives will provide specific feedback on individual subjects and the programme as a whole. Any concerns raised by the students will be addressed by the subject leaders or/and Programme Leader during the meeting, and a mutually-agreed plan of follow-up actions will be formulated as necessary.

6 TEACHING/LEARNING METHOD

As the students in the MOT programme will have had more University learning experiences upon admission, they should be better prepared to take on more responsibility of their own learning. Moreover, it is imperative that our students become active learners and critical consumer of the scientific literature. Therefore, the instructional focus would shift from a content-delivery mode to a more task-based approach in order to increase interactivity and enhance higher learning (Van Wiegel, 2002). A more interactive and task-based approach involving case studies and group discussions will be used more frequently in the MOT curriculum.

Blended teaching and learning approach, in which an e-learning component is incorporated to supplement in-class time, will be used more substantially in the MOT curriculum. E-learning would offer a flexible, dynamic and engaging learning situation for the students. Moreover, more classroom time can then be freed up and used more effectively to focus on knowledge application. This is particularly important considering the tightly packed academic schedule of the MOT programme.

One of the key features of this programme is the integral clinical education. There will be an increase in the number of clinical placements in NGO and community settings. It is mandatory that each student should complete one 4-week and one 7-week clinical placements in NGO/community setting during CEII-IV, in additional to observational visits to NGOs during CEI. Other placements would be arranged in Hospital Authority to provide quality training in clinical settings. The Department of Rehabilitation Sciences will be working with the Hong Kong Council of Social Service in coordinating the NGO placements.

The research component will be further strengthened in the MOT programme through the inclusion of a substantial research project. In the proposed MOT programme, the students will form small groups (3 students per group) and they will be assessed higher in individual work (individual reflective journal and viva). Group to individual effort is 60:40. Students will be assigned to faculty member to complete a research project, which includes literature review, research design, data collection and analysis, culminating in a written research report and oral presentation.

7 EXAMINATION AND ASSESSMENT

Throughout the programme, a subject is assessed on the basis of continuous assessment and/or examination. A summary of methods of assessment is presented in Table 3. More subjects are assessed by means of continuous assessment. Continuous assessment encourages students to work steadily and progressively through the semesters. It is therefore essential for the achievement of horizontal integration and vertical development of subjects within each semester and progressively though the programme. Continuous assessment may be in the form of tests, assignments, laboratory work, practical work, essays, case studies, field work and/or seminar presentation. The format and the relative weighting allocated for each subject is specified clearly in the subject syllabus.

Examination may take place at the end of individual subject teaching. Questions may be essay-type, short answer, multiple choices, practical skills…etc. The details are again set out in the syllabi of individual subjects. Subjects will be informed in advance of the format of the examination paper.

A calendar is presented to the students at the start of the academic year with the nature and timing of assessment for each subject. In some subjects, assessments are conducted during the course of study (such as seminar presentation, case reports). For other subjects, assessments can be conducted at the end of the subject teaching to assess the overall performance of students (such as end-of-subject practical test, written assignment or project report).

8 REGULATIONS FOR ASSESSMENT, PROGRESSION AND AWARD

General Assessment Regulations

Introduction

8.1. The General Assessment Regulations shall govern the Master in Occupational Therapy programme (MOT) which leads to PolyU award. The MOT programme shall, in addition, have its own programme – specific regulations, formulated within the framework of the General Assessment Regulations and students shall be advised of these regulations at the commencement of an academic year.

8.2 In this programme, students progress by credit accumulation i.e. allowing credits earned by passing individual subjects to be accumulated toward the final award.

8.3 For the purpose of these Regulations, a subject is defined as a discrete section of the programme, which is assigned a separate assessment. A list of subjects, together with their credit values, is shown in Table 1.

Admission, Subject registration and related regulations

8.4 Students' admission will be carried out only at the start of the academic year. In MOT, admission is, however, at the beginning of the second term of the academic year.

8.4.1 **Basic Entrance Requirements**

- The applicant should have obtained a bachelor degree from a reputable university.
- The applicant should have obtained credits for each of the following pre-requisite of university undergraduate-level courses before admission to the programme:
  - Human Anatomy (3 credits or equivalent)
  - Human Physiology (3 credits or equivalent)

- Applicants should fulfil the English Language Requirements stipulated by the University. If applicants are not native speakers of English, and their Bachelor's degree or equivalent qualification is awarded by institutions where the medium of instruction is not English, applicants are expected to fulfil the following minimum English language requirement for admission purpose.
  - A Test of English as a Foreign Language (TOEFL) score of 80 for the Internet-based test or 550 for the paper-based test;
    OR
  - An overall Band Score of at least 6 in the International English Language Testing System (IELTS).
- Preference will be given to applicants who are able to communicate effectively in English, Cantonese and Putonghua.

8.5 Students are required to progress through the programme in which they have registered in accordance with the specified pattern.

8.6 Full-time regular students are expected to complete subject registration before the commencement of each semester.

8.7 Students may register for subjects for the following semester on the basis of the subject results finalized by the subject offering department.

Credit transfer

8.8 In the case of a credit transfer, students will be given credit for recognized previous study and the assigned credit will be counted towards meeting the requirement of the award.

8.9 Credit transfer may take place with or without the grade being carried; the former should normally occur only when the credits to be transferred have been gained from within the University.

8.10 Normally, not more than 50% of the usual credit requirement for the academic award may be transferred from approved institutions outside the University.

8.11 For transfer of credit from programmes offered by PolyU, usually not more than 67% of the normal credit requirement for the award can be transferred.

8.12 In the cases where both types of credits are transferred (i.e. from programmes offered by PolyU and from approved institutions outside the University), not more than 50% of the normal credit requirement for the academic award may be transferred.

8.13 Transfer of credit will be allowed to contribute to a University award up to five years after the date of earning the credit.

8.14 For credit transfer of retaken subjects, the grade attained in the last attempt should be taken in the case of credit transfer with grade being carried over. Students applying for credit transfer for a subject taken in other institutions are required to declare that the subject grade used for claiming credit transfer was attained in the last attempt of the subject in their previous studies. If a student fails in the last attempt of a retaken subject, no credit transfer should be granted, despite the fact that the student may have attained a pass grade for the subject in the earlier attempts.

Regulations for assessment, progression and award

Assessment
Purpose of assessment

8.15 Assessment of learning and assessment for learning are both important for assuring the quality of student learning. Assessment of learning is to evaluate whether students have achieved the intended learning outcomes of the subjects that they have taken and have attained the overall learning outcomes of the academic programme at the end of their study at a standard appropriate to the award. Appropriate methods of assessment that align with the intended learning outcomes will be designed for this purpose. The assessment methods will also enable the teacher to differentiate students' different levels of performance within the subject. Assessment for learning is to engage students in productive learning activities through purposefully designed assessment tasks.

8.16 The purpose of assessment within this programme is to enable students to demonstrate that they have fulfilled the objectives and intended learning outcomes of each strand of subjects and have, in the final stage, achieved the standard appropriate to degree level award. Timely feedback should be provided to students so that they are aware of their progress and attainment for the purpose of improvement.

8.17 Assessment of the student's suitability to become a professional occupational therapist and for an award of the MOT goes beyond merely ensuring that s/he has attained a level of proficiency in knowledge and competence in skills. Emphasis is particularly laid on the ability to demonstrate maturity in personality, attitudes, values and behaviours, and a capacity for further development consistent with becoming a professional occupational therapist. These characteristics are taken from established codes of ethics of the profession. Intensive weekly contacts between the supervisor and the student during clinical placements provide a very appropriate and important context for such assessment. When a problem arises, personal tutors and relevant subject teachers will be involved to work out remedial actions, if necessary.

Assessment Rationale

8.18 Assessment methods adopted in this programme are appropriate to the achievement of the subject objectives and intended learning outcomes, and ultimately, the programme aims and intended learning outcomes.

8.19 Students are required to demonstrate their knowledge and comprehension of the required subjects. The acquisition of factual information is essential so that students can analyze, assimilate and apply this knowledge in both the occupational therapy-specific subjects and in the clinical education subjects. The students' grasp of concepts is assessed by oral and written presentations of various types. The development of skills is assessed through such means as practical work, reports, laboratory reports and tests.

8.20 The achievement of programme aims related to the acquisition of attributes such as independent thought/action and communication skills is assessed in a range of work modes throughout the programme, e.g., oral case presentations. The acquisition of these professional attributes is further reinforced in the clinical education component. The intellectual skills required of a competent practitioner are assessed through project work, assignments and essays requiring background reading.

8.21 Achievement of the programme aims relating to the development of skills of inquiry and the development of a critical and analytical approach is assessed through the subjects of Research Methods and Statistics, Research Project and Clinical Education.

8.22 The assessment of the programme aims and intended learning outcomes specific to the practice of occupational therapy depends on the integration of theory and practice in the application of clinical reasoning and problem solving skills.

8.23 The assessment methods adopted for Clinical Education subjects are designed to ensure that the student's ability in clinical reasoning develops as the academic programme progresses. As Clinical Education is an integral part of the programme, the assessment takes a holistic view of the Occupational Therapy process.

Methods of assessment

8.24 Throughout the programme, a subject is assessed on the basis of coursework and, in some subjects, a final examination.

8.25 Continuous assessment:

i. Students in their first two semesters spend more time learning theory and knowledge and less time learning application. The majority of the subjects in the programme are assessed by means of continuous assessment, which is considered to encourage the student to work steadily and progressively throughout the semester. It is therefore essential for the

achievement of horizontal integration and vertical development of subjects within each semester/ year and progressively through the programme.

ii. Continuous assessment may be in the form of tests, assignments, laboratory work, practical work, essays, case studies, project work and field work. The format and the relative weighting allocated for each subject is specified clearly in the subject syllabi.

8.26 Examination:

i. Examinations may take place at the end of each semester. All examinations planned for this programme are in written form. Questions may be essay-type, short answer, multiple choice, etc., the details of which are set out in the syllabi of the individual subjects. Students will be informed in advance of the format of the examination paper.

ii. It will be the responsibility of each subject examiner to compile all examination question papers, which will be checked by the Programme Leader.

Timing of continuous assessment and examinations

8.27 This may take many different forms, as stated above, and occur at intervals throughout the year. A calendar with the timing and nature of the assessments for each subject is presented to the students at the start of the academic year. One of the responsibilities of the subject examiner is to spread the programme workload evenly throughout the year and to maximize the advantages of this form of assessment. Students will be notified in advance of the timing of the assessments/examinations.

8.28 **Grading**

A student's overall performance in a subject shall be assessed as follows:

Subject grade	***Short description***	***Elaboration on subject grading description***
A+ A A-	Excellent	Demonstrates excellent achievement of intended subject learning outcomes by being able to skillfully use concepts and solve complex problems. Shows evidence of innovative and critical thinking in unfamiliar situations, and is able to express the synthesis or application of ideas in a logical and comprehensive manner.
B+ B B-	Good	Demonstrates good achievement of intended subject learning outcomes by being able to use appropriate concepts and solve problems. Shows the ability to analyse issues critically and make well-grounded judgements in familiar or standard situations, and is able to express the synthesis or application of ideas in a logical and comprehensive manner.
C+ C C-	Satisfactory	Demonstrates satisfactory achievement of intended subject learning outcomes by being able to solve relatively simple problems. Shows some capacity for analysis and making judgements in a variety of familiar and standard situations, and is able to express the synthesis or application of ideas in a manner that is generally logical but fragmented.
D+ D	Pass	Demonstrates marginal achievement of intended subject learning outcomes by being able to solve relatively simple problems. Can make basic comparisons, connections and judgments and express the ideas learnt in the subject, though there are frequent breakdowns in logic and clarity.
F	Fail	Demonstrates inadequate achievement of intended subject learning outcomes through a lack of knowledge and/or understanding of the subject matter. Evidence of analysis is often irrelevant or incomplete.

'F' is a subject failure grade, whilst all others ('D' to "A+') are subject passing grades.
No credit will be earned if a subject is failed.

Indicative descriptors for modifier grades

Main Grade (solid)	The student generally performed at this level, indicating mastery of the subject intended learning outcomes at this level.
+ (exemplary)	The student consistently performed at this level and exceeded the expectations of this level in some regards, but not enough to claim mastery at the next level.
- (marginal)	The student basically performed at this level, but the performance was inconsistent or fell slightly short in some regards.

Note: The above indicative descriptors for modifier grades are not applicable to the pass grades D and D+

8.29 The grade points assigned to subject grades attained by students from 2020/21 are as follows:

Grade	***Grade Point for grades attained from 2020/21***
A+	4.3
A	4.0
A-	3.7
B+	3.3
B	3.0
B-	2.7
C+	2.3
C	2.0
C-	1.7
D+	1.3
D	1.0
F	0.0

8.30 At the end of each semester, a Grade Point Average (GPA) will be computed as follows, and based on the grade point of all the subjects:

$$\frac{\sum_{n=1}^{N} \text{Subject Grade Point}_n \times \text{Subject Credit Value}_n}{\sum_{n=1}^{N} \text{Subject Credit Value}_n}$$

Where N = number of all subjects (inclusive of failed subjects) taken by the student up to and including the latest semester/term. For subjects which have been retaken, only the grade point obtained in the final attempt will be included in the GPA calculation.

In addition, the following subjects will be excluded from the GPA calculation:

- Exempted subjects
- Ungraded subjects
- Incomplete subjects
- Subjects for which credit transfer has been approved without any grade assigned^
- Subjects from which a student has been allowed to(i.e. those with the grade "W")

Any subject which has been given an "S" code, i.e. absent from all assessment components, will be included in the GPA calculation and will be counted as "zero" grade point. The GPA is thus the unweighted cumulative average calculated for a student, for all relevant subjects taken from the start of the programme to a particular point of time. GPA is an indicator of overall performance, ranges from 0.00 to 4.30.

^ Subjects taken in PolyU or elsewhere and with grades assigned, and for which credit transfer has been approved, will be included in the GPA calculation.

Progression

8.31 Board of Examiners

A Board of Examiners is appointed for each programme leading to a University award. It is required to follow the University's General Assessment Regulations, as well as the specific regulations approved for the programme. The Board of Examiners shall, at the end of each semester, determine whether each student is

(i) eligible for progression towards an award; or
(ii) eligible for an award; or
(iii) required to be deregistered from the programme.

8.32 When a student has a Grade Point Average (GPA) lower than 1.7, he/she will be put on academic probation in the following semester. Once the student is able to improve his/her GPA up to 1.7 or above at the end of the probation semester, the status of "academic probation" will be lifted. The status of "academic probation" will be reflected in the examination result notification but not in the transcript of studies.

8.33 A student will have `progressing' status unless he/she falls within any one of the following categories which may be regarded as grounds for deregistration from the programme:

(i) the student has reached the final year of the normal period of registration for that programme, as specified in the Programme Requirement Document, unless approval has been given for extension (applicable to students admitted in or after 2020/21); or
(ii) the student has reached the maximum number of retakes allowed for a failed compulsory subject; or
(iii) the student's GPA is lower than 1.7 for two consecutive semesters and his/her Semester GPA in the second semester is also lower than 1.7; or
(iv) the student's GPA is lower than 1.7 for three consecutive semesters; or
(v) the student has failed consecutively in any of the clinical education subjects twice.

Retaking a subject

8.34 Students may only retake a subject which they have failed (i.e. Grade F or S or U). Retaking of subjects is with the condition that the maximum study load of 21 credits per semester is not exceeded.

8.35 The number of retakes of a subject should be restricted to two, i.e. a maximum of three attempts for each subject is allowed.

8.36 For clinical education subjects, each clinical block can only be repeated once. A student who is unable to pass the clinical education subject for his/her second attempt is required to withdraw from the programme.

Exceptional circumstances

Absence from an assessment component

8.37 If a student is unable to complete all the assessment components of a subject, due to illness or other circumstances which are beyond his/her control and considered by the subject offering Department as legitimate, the Department will determine whether the student will have to complete a late assessment and, if so, by what means. This late assessment shall take place at the earliest opportunity, and normally before the commencement of the following academic year (except that for Summer Term, which may take place within 3 weeks after the finalisation of Summer Term results). If the late assessment cannot be completed before the commencement of the following academic year, the Faculty/School Board Chairman shall decide on an appropriate time for completion of the late assessment.

8.38 The student concerned is required to submit his/her application for late assessment in writing to the Head of Department offering the subject, within five working days from the date of the examination, together with any supporting documents. Approval of applications for late assessment and the means for such late assessments shall be given by the Head of Department offering the subject or the Subject Lecturer concerned, in consultation with the Programme Leader.

Eligibility for award

8.39 A student is eligible for the MOT award if he/she meets all the conditions shown below:

- Accumulation of 90 credits as defined in this document; and
- Satisfying all requirements defined in this document and as specified by the University; and
- Having a cumulative GPA of 1.7 or above at the end of the programme; and
- Obtaining an Average Grade of ‘C’ or above for all Clinical Education Subjects.

*Refer to Table 1 (page 10) for the details of number of credits.

Guidelines for award classification

8.40 Using the following guidelines, the Board of Examiners shall exercise its judgment in coming to its conclusions as to the award for each student, and where appropriate, may use other relevant information.

8.41 Any subjects passed after the graduation requirement has been met or subjects taken on top of the prescribed credit requirements for award shall not be taken into account in the grade point calculation for award classification.

8.42 The following guidelines will be used by the Board of Examiners to recommend the classification of the award:

Guidelines	
Distinction	The student's performance/attainment is outstanding, and identifies him/her as exceptionally able in the field covered by the programme in question.
Credit	The student has reached a standard of performance / attainment which is more than satisfactory but less than outstanding.
Pass	The student has attained the 'essential minimum' required for graduation at a standard ranging from just adequate to satisfactory.

Checking of eligibility for graduation

8.43 The computer system will identify potential graduates by generating potential graduate lists after the end of each semester. The system will check the following to determine students' eligibility for graduation:

(i) credit requirements for the MOT award; and
(ii) the minimum GPA value required for graduation

8.44 Departments will ensure that students wishing to graduate will have completed all necessary subjects by the desired graduation date, and will verify the eligibility of students for awards. The potential graduates identified by the computer system will be brought to the attention of the Programme Leader for verification, and will then be presented to the BoE for determination of the award classifications.

Assessment Results

8.45 Subject Lecturers have sole responsibilities for marking students' coursework and examinations scripts, grading them, finalising the results and informing each student of his/her results, in respect of the subject they teach. In this regard, Subject Lecturers will be accountable to the Head of

the subject offering Department, to ensure that the scripts are correctly marked and graded, and to avoid administrative errors at all times.

8.46 The authority for approving the overall results of students rests with the Board of Examiners (BoE).

The role of Board of Examiners and Faculty Board

Role of Board of Examiner

8.47 Each programme will have a Board of Examiners which will have to meet at the end of each semester.

8.48 The Board will consider the following:

(i) problematic cases such as cases for de-registration;
(ii) students' classifications of award; and
(iii) cases with extenuating circumstances

8.49 This Board will not attempt to change grades for any student in any subject.

8.50 The Head of the Department is to be Chairman of the Board of Examiners. The minimum number of a BoE's membership (including the Chairman, but excluding the Secretary) should be five, and it should be composed of staff members associated with the programme/scheme concerned and some other senior staff members. The Programme Leader will be an ex-officio member of the Board. The membership should be proposed by the Head and endorsed by the Dean.

Role of Faculty Board

8.51 Faculty Board will ratify the decisions made by the Board of Examiners without duplicating the effort of the latter. It should deal with individual cases only when extenuating circumstances have played a role.

8.52 For cases outside the provision of programme requirements and University regulations, the decisions of Faculty Board (in accordance with the existing terms of reference) will be referred to Academic Regulation Committee for ratification. Faculty Board will determine the granting of aegrotat award.

8.53 The Faculty Board should be presented with statistical information on student performance in each programme.

9. DEPARTMENTAL POLICY/GUIDELINES ON STUDENT MISCONDUCT

Penalty – PolyU Student Handbook

The University may take disciplinary action against any student who commits any misconduct, violates the laws of Hong Kong or any of the University's regulations and rules.
Appropriate disciplinary actions, depending on the seriousness of the case, will be taken against a student who is found guilty of the alleged offence. Penalties include:

- community services;
- disqualification of results;
- reprimand;
- fine;
- suspension from use of any of the University facilities for a specified period;
- suspension of studies for a specified period of time;
- expulsion for a specified period or indefinitely; and
- any other penalties as considered appropriate.

Disciplinary actions against students' misconducts will be recorded in students' records. This includes the **inclusion of a remark** to subject failure grade which is awarded due to academic dishonesty, and also putting students who have committed any misconduct on '**disciplinary probation'**. Details of the arrangements are as follows:

1. The above mentioned remark and disciplinary probation record would be recorded and shown in the students' records as well as assessment result notification, transcript of studies and testimonial.
2. For students who have been awarded a failure grade as a result of disciplinary action, a remark # will be recorded against the concerned subject failure grade denoting "Disqualification of result due to academic dishonesty". The remark will appear on the result notification and transcript of studies and will be removed upon the students' leaving the university.
3. The remark will normally cover the following misconduct cases:
   · cheating in assessment work, tests or examinations
   · aiding academic dishonesty
   · plagiarism
   · violating rules governing the conduct of examinations that are related to possible cheating (including the possession of unauthorized materials at the examination, use of mobile phones during examination, etc)
4. Students who have been recorded with the remark will also be subject to the penalty of the lowering of award classification by one level.
5. Students who have committed disciplinary offences will be put on 'disciplinary probation'. The status of 'disciplinary probation' will be shown in the students' record as well as the assessment result notification, transcript of studies and testimonial during the probation period, until their leaving the University. The disciplinary probation is normally one year unless otherwise decided by the Student Discipline Committee.
6. Students who have been put on disciplinary probation will be deprived of certain privileges. They shall not receive honour from the University or engage in activities which represent the University including the following:

scholarships/awards/prizes; selected as outstanding students/Student Ambassadors; leadership roles within the University; Pre-Global Student Challenge and Entrepreneurship Scheme

Misconduct during Clinical Placements – RS Department

The Department of Rehabilitation Sciences trains physiotherapists and occupational therapists for future practice. The previous sections concerned academic misconduct in an academic setting. Special consideration is required when students attend clinical placements. Details related to clinical education can be found in the *Clinical Education Student Handbook*.

It is necessary that students adhere to ethical and legal practice standards during clinical placements. Adherence means that the student:

- Abides by relevant ethical codes and standards of practice guidelines.
- Adheres to institutional policy and procedures.
- Identifies situations in which ethical questions are present.
- Reports violations of ethical practice.
- Abides by pertinent laws and regulations, including those applying to licensure laws.
- Identifies situations in which legal questions are present.

Examples of misconduct are
- Breach of client confidentiality
- False documentation
- False report

If under a specified level of guidance for a clinical placement (depending on the advancement of studies), a student fails to 1) practice in a safe manner that minimizes risk to clients, self, and others, or 2) adhere to ethical and/or legal practice standards, or 3) complete any one placement without legitimate reasons, or 4) achieve a satisfactory level of performance, the student will be awarded a grade 'F' (Failed). If allowed to remain in the programme, the student will be required to retake a clinical placement of same focus of practice and must perform at or above a 'SATISFACTORY' level.

10. STUDENT FEEDBACK QUESTIONNAIRE (SFQ)

The Student Feedback Questionnaire (SFQ) is a system that PolyU uses to collect feedback from students on teaching and learning. The SFQ system is faculty-based, i.e., different faculties may have slightly different policies, procedures, and SFQ forms. However, the purposes, processing, and intended uses of the SFQ are essentially the same.

Under this system, students are asked to complete the SFQ in class to provide feedback on their experience of studying a subject. This SFQ exercise normally takes place in the last few weeks of the semester. However, for subjects that involve more than one teacher, it may take place earlier, when the teaching of the particular lecturer comes to an

end. Some lecturers may also use the mid-semester SFQ to solicit feedback from students so as to modify or adjust their teaching to improve learning for the remaining weeks of the semester.

For more information about the SFQ, please visit the following webpage:
http://www.polyu.edu.hk/esfq/student

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http://www.writing.utoronto.ca/advice/using-sources/how-not-to-plagiarize
http://www.plagiarism.org/
http://plagarism.com
http://www.northwestern.edu/uacc/plagiar.html
http://owl.english.purdue.edu/
http://www.powa.org/
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Appendix 1

Operational Definition of Teaching & Learning Methods Used in the Master in Occupational Therapy

Lecture

Process of instruction where the lecturer uses mainly verbal information which may be supplemented by the used of teaching aids to impart knowledge to students.

Tutorial

Process of instruction where the lecturer acts as an adviser to small number of students who discuss and evaluate portions of subject matter of mutual interest with a view to increasing the depth of understanding.

Seminar

Meeting of students engaged in an advanced specific study for discussing a problem of mutual interest along with the lecturer.

Lecturer-led-practical

Procedure where the lecturer demonstrates how to operate equipment or implement a technique, which the students practise afterwards under supervision.

Project work

Procedure carried out by students in solving a problem in its natural setting. It includes planning, collection and organization of data and the process results in a definite piece of work. The lecturer guides the students to consider the most appropriate approach and the students take up the responsibility of carrying out the work in details.

Clinical visit

Student' visit to a clinical setting led by a lecturer in order to learn, by observation and or participation, about the nature of setting. Patients, functions of occupational therapist and those of other workers.

On-line Teaching/E-learning

The use of technology provides a range of possible learning experience which is difficult to achieve in the face-to-face classroom. There is a wide range of activities of different levels of sophistication, ranging from as simple as e-mail question and answers, online module or online forums to highly sophisticated simulations.

Appendix 2

Curriculum Map

This curriculum map gives a holistic view of the degree to which each intended learning outcomes will be taught and assessed in Master in Occupational Therapy programme

The indicators (I, R, A) show the treatment of the programme intended learning outcomes in a subject:

I	(Introduced)	That the learning leading to the particular intended outcome is introduced in that subject.
R	(Reinforced)	That the learning leading to the particular intended outcome is reinforced/emphasised in that subject.
A	(Assessed)	That the performance which demonstrates the particular intended outcome is assessed in that subject

		OT Core Subjects																					
Programme Intended Learning Outcomes		**Year One Semester One**					**Year One Semester Two**						**Year One Semester Three**				**Year Two Semester One**				**Year Two Semester Two**			**Year Two Semester Three**		
		RS5308	**RS5302**	**RS5355**	**RS5356**	**RS5358**	**RS5303**	**RS5351**	**RS5352**	**RS5360**	**RS5305**	**RS5371**	**RS5354**	**RS5357**	**RS5362**	**RS5372**	**RS5353**	**RS5361**	**RS5366**	**RS5359**	**RS5363**	**RS5364**	**RS5323**	**RS5373**	**RS5374**	**RS5324**
1	Synthesise current biological, behavioural social and clinical sciences for occupational therapy practice with due reference to the holistic approach in health care issues.	I A	I A	I	I			I R A	I	R A	A	I	I R	R A	I R A	R A	I		R A	I	R A		R	R A	R A	R A

	OT Core Subjects																							
Programme Intended Learning Outcomes		**Year One Semester One**					**Year One Semester Two**						**Year One Semester Three**				**Year Two Semester One**				**Year Two Semester Two**			**Year Two Semester Three**		
		RS5308	**RS5302**	**RS5355**	**RS5356**	**RS5358**	**RS5303**	**RS5351**	**RS5352**	**RS5360**	**RS5305**	**RS5371**	**RS5354**	**RS5357**	**RS5362**	**RS5372**	**RS5353**	**RS5361**	**RS5366**	**RS5359**	**RS5363**	**RS5364**	**RS5323**	**RS5373**	**RS5374**	**RS5324**
2	Identify patients'/clients functional problem resulting from development dysfunction, physical dysfunction, psychosocial dysfunction and /or ageing process, plan, and provide quality and evidence-based OT programmes to help them fulfil own life roles and function independently in the community.	I	I A	I A	I	A		I R A	I	R A	A	I R	I	R A	I R A	R A	I	A	R A	I	I R A	A	R	R A	R A	R
3	Contribute to the planning, organising,				I			I R A	I	R A	I		I	R	I R A	I			I	I	R A		I R A	I	I R A	R

		OT Core Subjects																							
Programme Intended Learning Outcomes		**Year One Semester One**					**Year One Semester Two**						**Year One Semester Three**				**Year Two Semester One**				**Year Two Semester Two**			**Year Two Semester Three**		
		RS5308	**RS5302**	**RS5355**	**RS5356**	**RS5358**	**RS5303**	**RS5351**	**RS5352**	**RS5360**	**RS5305**	**RS5371**	**RS5354**	**RS5357**	**RS5362**	**RS5372**	**RS5353**	**RS5361**	**RS5366**	**RS5359**	**RS5363**	**RS5364**	**RS5323**	**RS5373**	**RS5374**	**RS5324**
	managing, leading and assuring the quality of services of an occupational therapy unit.																								
4	Understanding the local and international health and labour policies and trend, identify market needs for OT services, and engage in service development and public education for Hong Kong and mainland China.				I			I R A	I	I		I	R		I R A	I			I	I	I R A		I R A	I	I R A	R
5	Effectively use English/Chinese (verbal and written) to communicate		A	I	I	R A	R A	I R A	I	R A	A	R A	R	R A		R A		R	R A	I	R A	R	R A	R A	R A	R A

		OT Core Subjects																					
Programme Intended Learning Outcomes		**Year One Semester One**					**Year One Semester Two**						**Year One Semester Three**				**Year Two Semester One**				**Year Two Semester Two**			**Year Two Semester Three**		
		RS5308	**RS5302**	**RS5355**	**RS5356**	**RS5358**	**RS5303**	**RS5351**	**RS5352**	**RS5360**	**RS5305**	**RS5371**	**RS5354**	**RS5357**	**RS5362**	**RS5372**	**RS5353**	**RS5361**	**RS5366**	**RS5359**	**RS5363**	**RS5364**	**RS5323**	**RS5373**	**RS5374**	**RS5324**
	and interact effectively with clients, care-givers, peers, colleagues and other health care professionals with clarity and sensitivity in professional manner.																									
6	Effectively use interpersonal skills to enhance treatment process and reduce mis-understanding and conflict among peers, patients, care-givers and team members.		R		I		R	I R A	I	R	A	R A	I	R A		R A			R A	I	R A		R A	R A		R A

		OT Core Subjects																					
Programme Intended Learning Outcomes		**Year One Semester One**					**Year One Semester Two**						**Year One Semester Three**				**Year Two Semester One**				**Year Two Semester Two**			**Year Two Semester Three**		
		RS5308	**RS5302**	**RS5355**	**RS5356**	**RS5358**	**RS5303**	**RS5351**	**RS5352**	**RS5360**	**RS5305**	**RS5371**	**RS5354**	**RS5357**	**RS5362**	**RS5372**	**RS5353**	**RS5361**	**RS5366**	**RS5359**	**RS5363**	**RS5364**	**RS5323**	**RS5373**	**RS5374**	**RS5324**
7	Continue ongoing and professional development through participation in professional conferences, workshops, postgraduate studies so as to keep abreast of local and internal professional and technological developments in particular the field of rehabilitation.				I		R	I R	I	R A			R	R		R		R		I	R A	R	R A		R	R A
8	Demonstrate leadership skills in student organizations, social functions,				I			I R A						R				I		I	R A	I	R A		R A	R A

		OT Core Subjects																					
Programme Intended Learning Outcomes		**Year One Semester One**					**Year One Semester Two**						**Year One Semester Three**				**Year Two Semester One**				**Year Two Semester Two**			**Year Two Semester Three**		
		RS5308	**RS5302**	**RS5355**	**RS5356**	**RS5358**	**RS5303**	**RS5351**	**RS5352**	**RS5360**	**RS5305**	**RS5371**	**RS5354**	**RS5357**	**RS5362**	**RS5372**	**RS5353**	**RS5361**	**RS5366**	**RS5359**	**RS5363**	**RS5364**	**RS5323**	**RS5373**	**RS5374**	**RS5324**
	outside visits to demonstrate the leadership.																									
9	Translate ethical principles into responsible and accountable behaviour and exhibit appropriate personal and professional conduct.				I			I R A	I	R	R	R A	I	R A		R A			R A	I	R		R A	R A	R A	R A
10	Act as responsible citizens fulfilling social and civic duties to promote quality of life among people with disabilities in Hong Kong and China.				I			I R	I	R	R	I	I	I R		R			R	I	R A		I R	R	R	R

PART B

SYLLABI OF SUBJECTS

Introduction

This section contains the syllabi of the Basic and Clinical Science subjects, Professional subjects and Clinical Education subjects, and the criteria for the award of grades for the Master in Occupational Therapy (MOT) programme. The subject title, objectives, intended learning outcomes, indicative syllabus, teaching/learning methodology, assessment method and weighting of assessment, student study effort expected and references are written for each subject shown. They are presented in the following format:

Information on Subject

Title and subject code, credit values, level, pre-requisites and co-requisites are listed.

Objectives

Objectives in this booklet are written in terms of the educational intention of the teaching staff, e.g. "To introduce students to the occupational therapy profession ".

Intended Learning Outcomes

Intended learning outcomes are written in terms of "Professional/academic knowledge and skills" and "Attributes for all roundedness" indicating the expected outcomes of students' performance. Hence, every outcome in this booklet should be assumed to be prefaced by the following words: -

"Upon completion of the subject, students will be able to…"

e.g. "4. Explain the role of occupation / activity in the human adaptation process"

Teaching/Learning Methodology

Essential teaching and learning methods (operational definition shown in Appendix 1 of MOT Programme Requirement Document) to be used for student learning are listed for each subject.

Assessment method

Assessment methods with appropriate weighting for the subject including its contribution towards overall marks of the subject are written for each subject. It also provides a brief explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes

For subjects which have only <u>one</u> assessment element, i.e. continuous assessment, the weighting of various tests and/or assignments which add up to a maximum of 100 percent, are written for each subject.

For subjects, which have two assessment elements, i.e. continuous assessment and examination, the relative weighting of these two assessment elements, which adds up to a maximum of 100 percent, are shown for each subject. Furthermore, the relative weighting of

various test and/or assignments in the continuous assessment element of the subject are written in percentile scores.

References

The essential and recommended reading lists are written for each subject.

YEAR 1 SYLLABUS
SEMESTER 1

Subject Code	**RS5308**
Subject Title	**FUNCTIONAL ANATOMY**
Credit Value	2
Level	5, Year 1-Semester 1
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	By completing this subject, the students will be able to demonstrate an understanding of structures of human body and apply the anatomy knowledge to clinical practice in functional perspectives.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a. identify the gross structures of the human body using skeletons, plastic models, cadavers, and living models. b. identify the connective tissue structures supporting joints. c. integrate joint movements and the muscles which produce them. d. identify and palpate accurately arterial pulses, bony and soft tissue structures of the human body. e. analyze the relevant anatomical structures involved given a particular brief case study. f. synthesize patterns of muscle weakness/paralysis and/or sensory loss based on the segmental and peripheral distribution of the normal body's nerve supply and apply anatomy knowledge in functional perspectives of the human body.
Subject Synopsis/ Indicative Syllabus	<u>Overview of the Body</u> • The systems of neurology, osteology, and mycology will be introduced. • Focus includes anatomical terminology and descriptive terms, arrangement of the skeletons, gross structure and classification of bones, classification and function of joints and muscles and the regional distribution of nerves and blood vessels. <u>Regional Study:</u> • Lower Limb and Pelvis • Upper Limb and Shoulder Girdle • Trunk, Head & Neck <u>Regional Study:</u> • Overview of regions of the brain and introduction to neuroanatomy (cranial nerves, their functions and pathways)
Teaching/Learning Methodology	Through independent and group-study, students will gain a basic knowledge of the structure of the human body, focusing on the functional perspectives of the musculoskeletal and neurology systems. Required pre-readings will introduce the terminology, organization, and relevant development, structure and function of

<table>
<tr><td></td><td>the systems or regions of the body under study each week. Tutorial format is used to provide overviews of the structures underlying the systems and regions of the body, to clarify difficult concepts involving these structures and to provide brief case studies which highlight the relevance of anatomical knowledge in rehabilitation. In laboratory sessions, a variety of educational media (e.g., skeletons, cadaver prosections, models, reference materials, multimedia self-learning packages) are used to enhance learning. Students will be expected to complete pre-readings prior to the laboratory sessions so that they can participate actively in the learning process. Also, to that end, students will teach small portions of lab materials to their peers on occasion. The remainder of laboratory material is learned via instructor-facilitated, independent and/or small group study.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="6">Intended subject learning outcomes to be assessed (Please tick as appropriate)</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td></tr>
<tr><td>Continuous Assessment</td><td>60</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Examination</td><td>40</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="6"></td></tr>
</table>
<u>Continuous assessment</u>
Peer teaching (10%) – achieve intended learning outcomes #a-c by teaching small portions of laboratory materials to their peers.
Mid-term test (20%) – achieve intended learning outcomes #a-d through multiple choices and labeling questions.
Laboratory test (30%) – achieve intended learning outcomes #a-e through identification of body structures, integration of the joint movements and the muscles which produce them, and the surface anatomy of human body.
<u>Examination</u>
Final examination (40%) – through multiple choice questions and case-related questions which will assess all of the intended learning outcomes for the subject and specifically will be checking their ability in applying anatomy knowledge in functional perspectives of the human body.
</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td>(46 Hrs.)</td></tr>
<tr><td>▪ Lecture</td><td>10 Hrs.</td></tr>
<tr><td>▪ Laboratory</td><td>36 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(90 Hrs.)</td></tr>
<tr><td>▪ Independent study and peer teaching</td><td>30 Hrs.</td></tr>
</table>
</td></tr>
</table>

	preparation	
	▪ Preparation for continuous and examination	60 Hrs.
	Total student study effort	**<u>136 Hrs.</u>**
Reading List and References	Agur AMR, Dalley AF (2009) *Grant's Atlas of Anatomy, 12th ed.* Philadelphia: Lippincott Williams & Wilkins. Moore KL, Dalley AF, Agur AMR (2010) *Clinically Oriented Anatomy, 6th ed.* Philadelphia: Lippincott Williams & Wilkins.	

Subject Code	**RS5302**
Subject Title	**CLINICAL NEUROSCIENCE AND NEUROLOGY**
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	1. Students will gain knowledge in the functions of various parts of the nervous system, and understand how structural and functional changes in certain parts of the nervous system may lead to neurological deficits for patients. 2. Students will understand recent development in clinical neuroscience, and how these concepts can be integrated in clinical applications.
Intended Learning Outcomes	***On successful completion of the subject, a student will be able to:*** <u>Professional/academic knowledge and skills</u> a. analyze mechanisms of information processing which occur at different levels of the nervous system. b. analyze functions of the nervous system, e.g., sensorimotor: sensation; control of posture, locomotion, reaching; higher cortical functions: attention, memory, perception, language. c. integrate knowledge of the structure and function of the nervous system to explain selected 'altered' states, i.e., due to development, injury or disease. d. synthesize information on the adaptive range of the nervous system in order to explain: • the recovery of function due to injury or disease • the subsequent functioning of the system, after injury or disease • the continued development of an altered system <u>Attributes for all-roundedness</u> e. read and summarize information from the scientific and professional literature related to clinical neuroscience.
Subject Synopsis/ Indicative Syllabus	1. Review: the neuron and synaptic transmission 2. Development of the nervous system 3. Anatomy and physiology of the nervous system – system and region approaches a. Somatosensory System - Pain - Sensations b. Autonomic Nervous System c. Motor System - Perception and movement - Motor control - Muscle tone

<table>
<tr><td></td><td>
- Movement disorders
d. Auditory, Vestibular, and Visual System
e. Blood supply and cerebrospinal fluid system
f. Peripheral Nervous System
g. Spinal Region
h. Brain Stem
i. Cerebrum
-Attention
- Memory
- Language, communication
- Perception
4. Clinical correlates: Explain how an altered state of the nervous system would lead to common neurological conditions
5. Introduce the concept of neuroplasticity as the foundation of rehabilitation
6. Introduce the advances in clinical neuroscience
</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>
A blended teaching mode will be adopted. Lectures will be delivered. Based on assigned readings and/or video presentations, students will be able to understand the mechanisms underlying specific function(s) of the nervous system. Clinical correlates will be included to explain the pathophysiology of common neurological conditions.

Laboratory sessions allow students to observe brain specimens or models of different neural structures and to observe methods to study brain functions. By deepening their understanding of neuroanatomy, students can appreciate the contributions of each specific neural structure for maintaining normal neurological function in human being. Students can also appreciate approaches to examine these neural structure and functions.

Self-directed learning encourages students to review the subject content and to continue to seek current knowledge by referring to reference materials.
</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="5">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>E</td></tr>
<tr><td>2 MCQ tests</td><td>90</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Laboratory work</td><td>10</td><td></td><td>√</td><td>√</td><td></td><td></td></tr>
<tr><td>Self-directed learning</td><td>-</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="5"></td></tr>
</table>

MCQ test: Students will be tested on the theoretical knowledge of clinical neurology and neuroscience delivered in the lectures and laboratories background
</td></tr>
</table>

<table>
<tr><td></td><td colspan="2">Laboratory work: In-class laboratory work assignment will be conducted to ensure that students have active learning on the materials delivered during the laboratory sessions.

Self-directed learning encourages students to review the subject content and continue to seek current knowledge by referring to reference materials.</td></tr>
<tr><td rowspan="6">Student Study Effort Expected</td><td>Class contact:</td><td>(41 Hrs.)</td></tr>
<tr><td>▪ Lecture</td><td>36 Hrs.</td></tr>
<tr><td>▪ Laboratory session</td><td>5 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(65 Hrs.)</td></tr>
<tr><td>▪ Self –directed learning</td><td>65 Hrs.</td></tr>
<tr><td>Total student study effort</td><td><u>106 Hrs.</u></td></tr>
<tr><td>Reading List and References</td><td colspan="2"><u>Required Text:</u>
Lundy-Ekman L. (2018). Neuroscience – Fundamentals for Rehabilitation. 5th ed. Philadelphia: W.B. Saunders. USA.

<u>Recommended Text / Reading:</u>
Bear M F. (2013) Neuroscience: exploring the brain. 4th ed. Baltimore: Lippincott.

Gazzaniga M, Ivry R B, Mangun G R. (2018). Cognitive Neuroscience: The Biology of the Mind. 5th ed. W. W. Norton & Company</td></tr>
</table>

Subject Code	**RS5355**
Subject Title	**OT FOUNDATIONS IN HUMAN PERFORMANCE**
Credit Value	4
Level	5, Year 1 – Semester 1
Pre-requisite/ Co-requisite/ Exclusion	Nil
Objectives	To develop students with the knowledge and understanding of the performance components as related to occupational therapy practice.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** *Professional/academic knowledge and skills* a. apply the understanding of structures of human body and apply the anatomy knowledge to explain the development and normal functioning of motor, sensory-perceptual, cognitive, and psychosocial components of human beings b. integrate knowledge of the human performance components to explain for 'altered' or impaired conditions due to injury and/or illness c. evaluate human performance components in aspects of motor, sensory-perceptual, cognitive, and psychosocial functioning d. interpret and analyze assessment results essential for occupational therapy practice *Attributes for all-roundedness* e. communicate clearly and effectively in English. f. acquire skills for independent learning.
Subject Synopsis/ Indicative Syllabus	1. Concepts of motor control and motor learning 2. Models and stages of motor development 3. Reflex, righting reactions and balance reactions in relation to motor skill development 4. Fine motor skills for hand functions 5. Nature and functions of sensory-perceptual functioning 6. Intelligence and cognitive functioning 7. Concepts of psychosocial functioning including self-concept / self-esteem, motivation and emotion, role performance and social competence 8. Clinical assessments for motor and sensori-perceptual functioning including range of motion, muscle strength, somatosensation, kinaesthesia, and visual perception 9. Clinical assessments for mental state and cognitive functioning 10. Clinical skills for effective interview, emotion and stress management, and leading a therapeutic activity for a small

<table>
<tr><td></td><td>group
11. Interpretation of clinical assessment results to explain for ‘impaired’ functioning</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>Lectures are used to introduce and explain the knowledge and concepts as related to the nature and functions of key human performance components.

Interactive learning activities are used in tutorials to facilitate students to clarify and consolidate the concepts and knowledge learned in lectures and to apply the knowledge of normal functioning in the understanding of sensori-motor, cognitive and/or psychosocial dysfunctions seen in clients following injury and/or illness.

Skill labs are arranged for students to learn and practice clinical skills required for the assessment of motor, sensory-perceptual, cognitive and psychosocial functions. Students will also learn to interpret the assessment findings using case scenarios.

An e-learning website is developed as a learning platform for students to perform self-study the essentials of functional anatomy and/or to prepare for tutorials.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="6">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td></tr>
<tr><td>Practical tests</td><td>35</td><td></td><td></td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Tests</td><td>65</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="6"></td></tr>
</table>
<u>Practical tests</u>
Practical tests (35%) – are used to evaluate students’ hands-on performance of clinical assessments skills for two human performance components (motor and psychosocial)
<u>Tests</u>
Written tests (65%) – comprise multiple choice questions and short questions, are used to evaluate students’ understanding of knowledge and concepts related to human performance components, in terms of normal development and functioning, interpretation of clinical assessment results to explain for impaired functioning.</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td>(62 Hrs.)</td></tr>
<tr><td>▪ Lecture</td><td>28 Hrs.</td></tr>
<tr><td>▪ Tutorials/Practical sessions</td><td>28 Hrs.</td></tr>
<tr><td>▪ Workshops</td><td>6Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(80 Hrs.)</td></tr>
</table>
</td></tr>
</table>

	▪ E-learning website	40 Hrs.
	▪ Self-directed learning/ Open lab	40 Hrs.
	Total student study effort	**<u>142 Hrs.</u>**
Reading List and References	*Cooper, C. & Deshaies, l. (Eds.). (2013). Mosby's Field Guide to Occupational therapy for Physical Dysfunction. St. Louis: Mosby.* Corrigan, P. W., Schade, M. L., Liberman, R. P. (1992). Social Skills Training. In R. P. Liberman, (Ed.). In Handbook of psychiatric rehabilitation. International: Allyn & Bacon. Philadelphia: W.B. Saunders. Crepeau, E. B., Cohn, E. S. & Schell, B. A. B. (Eds.). (2009). *Willard & Spackman's occupatioal therapy* (11th ed.). Philadelphia: Lippincott Williams & Wilkins. Davidson, H. (1991). Performance and the social environment. In C.H. Christiansen, C. M. Baum (Eds.), *Occupational therapy: overcoming human performance deficits* (pp. 143-178). Thorofare, NJ: Slack. Chapter 6. *McColl, M.A. (1997). Social support and occupational therapy. In C. H. Christiansen & C. M. Baum (Ed.), Occupational Therapy: enabling function and well-being (2nd ed.) (pp. 411-425). Thorofare, NJ: Slack.* *Pendleton, H.M. & Schultz-Krohn, W.(Eds.). (2013). Pedretti's Occupational therapy: Practice skills for physical dysfunction (7th ed.) St. Louis: Mosby.* Trombly, C. A. & Radomski, M. V. (2008). *Occupational therapy for physical dysfunction*. (6th ed.). Baltimore: Williams and Wilkins.	

Subject Code	**RS5356**
Subject Title	**OT THEORY AND PROCESS I**
Credit Value	3
Level	5, Year 1 – Semester 1
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	Formulate a basic and core understanding on the philosophical beliefs, theories and practice models underpinning Occupational Therapy (OT) practice, and formulate a basic and core framework on Occupational Therapy process.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** <u>*Professional/academic knowledge and skills*</u> a. develop basic understanding about the philosophical base and beliefs of OT b. understand contemporary OT models c. understand OT process d. understand roles and functions of OT e. demonstrate an understanding about the term 'disability' and 'people live with disability in Hong Kong', and thus develop ethical consideration f. understand and explain the importance of academic integrity and behaviors
Subject Synopsis/ Indicative Syllabus	1. Context of OT including historical perspective, current local and international trends 2. Key OT concepts that guide practice and theoretical perspectives underpinning intervention strategies 3. Introduction of concepts of occupational performance and human occupation with reference to Person-Environment-Occupation model and Model of Human Occupation 4. Introduction to the tools generic to OT practice 5. Introduction to basic OT process 6. Basic ethical perspectives in health care practice 7. Understanding of term: impairment, limitation in activity (disability) and restriction in participation (handicap) & its related concepts in International Classification of Functioning, Disability and Health
Teaching/Learning Methodology	Teaching and learning methodology include: lectures, tutorials, and project work. Lectures are to cover the philosophical base, core beliefs, concepts and process underpinning OT practice. Tutorials with case studies would be adopted to illustrate the application of OT models, OT process and roles & functions of OT. There is also an online tutorial on academic integrity through

<table>
<tr><td></td><td>a link within this subject to Learn@PolyU to facilitate students' awareness of the importance of academic integrity and behaviors. Through clinical visits, students would have an initial understanding of the clinical applications of different concepts, models and roles & functions of OT. Project work would allow students to appreciate more in-depth on the concepts and models underpinning OT practice.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="6">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td></tr>
<tr><td>Online Tutorial on Academic Integrity</td><td>Pass or Fail</td><td></td><td></td><td></td><td></td><td></td><td>✓</td></tr>
<tr><td>Mini-Quiz</td><td>15</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Group Project</td><td>30</td><td>✓</td><td>✓</td><td></td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Individual Reflection Report</td><td>10</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Examination</td><td>45</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="6"></td></tr>
</table>
<u>Online Tutorial on Academic Integrity</u>
<u>Assessment of students' performance will use a letter-grading system, except for the online tutorial on academic integrity (pass/fail). It is to be noted that students are required to obtain a pass in the online tutorial in order to pass the entire subject.</u>

<u>Mini-Quiz</u>
Written tests and examination (15%) – aims to assess student's understanding and application of the theories, models and process underpinning OT practice.

<u>Group Project</u>
Project work (30%) – aims to assess student's abilities to study in greater depth on concepts and models underpinning OT practice.

<u>Individual Reflection Report</u>
Individual Reflection Report (10%) – aims to evaluate student's ability to appreciate critically, on his/her own attitudes and the implications for future development, as a student and future occupational therapist.

<u>Examination</u>
Written tests and examination (45%) - aims to assess student's understanding and application of the theories, models and process underpinning OT practice.
</td></tr>
</table>

<table>
<tr><td rowspan="8">Student Study Effort Expected</td><td>Class contact:</td><td>(42 Hrs.)</td></tr>
<tr><td>▪ Lecture</td><td>28 Hrs.</td></tr>
<tr><td>▪ Tutorial</td><td>14 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(62 Hrs.)</td></tr>
<tr><td>▪ Project presentation preparation (including scheduled consultation sessions with lecturer)</td><td>16 Hrs.</td></tr>
<tr><td>▪ Self-study</td><td>42 Hrs.</td></tr>
<tr><td>▪ Reflection report write up</td><td>4 Hrs.</td></tr>
<tr><td>Total student study effort</td><td><u>104 Hrs.</u></td></tr>
<tr><td>Reading List and References</td><td colspan="2"><u>Required textbook:</u>

Schell, B. A. B. & Gillen, G. (Eds.). (2019). Willard and Spackman's occupational therapy (13rd ed.). Philadelphia: Lippincott Williams & Wilkins. [One copy in Reserve Collection and E-book available in the library]

<u>Recommended textbook:</u>

Christiansen, C. H., Baum, C. M., & Bass, J. D. (Eds.). (2015). Occupational therapy: Performance, participation and well-being (4th ed.). Thorofare, NJ: Slack Incorporated. [One copy in Reserve Collection]

Kielhofner, G. (Ed.). (2009). Conceptual foundations of occupational therapy practice (4th ed.). Philadelphia: F.A. Davis. [E-book available in the library]

Creek, J., & Lougher, L. (2008). Occupational therapy and mental health (4th ed.). Edinburg Churchill Livingstone.

Kramer, P., Hinojosa, J. & Royeen, C.B. (Eds.) (2003). Perspectives in human occupation: Participation in life. Philadelphia: Lippincott Williams & Wilkins.

<u>Reading list:</u>

American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th edition). American Journal of Occupational Therapy, 74(Suppl. 2), 7412410010.

American Occupational Therapy Association. (1994). Uniform terminology for occupational therapy – third edition. American Journal of Occupational Therapy, 48(11), 1047-1054.

Baum, M. C., & Law, M. (1997). Occupational therapy practice: Focusing on occupational performance. American Journal of Occupational Therapy, 51(4), 277-287.

Bossers, A., Kernaghan, J., Hodgins, L., Merla, L., O'Connor, C., & Kessel, M. V. (1999). Defining and developing professionalism. Canadian Journal of Occupational Therapy, 66(3), 116-121.

Haglund, L., & Kjellberg, A. (1999). A critical analysis of the model of human occupation. Canadian Journal of Occupational Therapy, 66(2), 102-108.

Hemmingsson, H., & Jonsson, H. (2005). An occupational perspective on the concept of participation in the international classification of functioning, disability and health – some critical remarks. American Journal of Occupational Therapy, 59(5), 569-576.</td></tr>
</table>

	Iezzoni, L. I. (2003). Targeting health care improvement for persons with disabilities. *International Journal for Quality in Health Care, 15(*4), 279-281. Kielhofner, G. (2005). Rethinking disability and what to do about it: Disability studies and its implications for occupational therapy. *American Journal of Occupational Therapy, 59*(5), 487-496. Law, M. (2002). Participation in the occupations of everyday life. *American Journal of Occupational Therapy, 56*(6), 640-649. Strong, S., Rigby, P., Stewart, D., Law, M., Letts, L., & Cooper, B. (1999). Application of the person-environment-occupation model: A practical tool. *Canadian Journal of Occupational Therapy, 66*(3), 122-133.

Subject Code	**RS5358**
Subject Title	**HUMAN OCCUPATIONS**
Credit Value	4
Level	5, Year 1 – Semester 1
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	1. understand the nature of occupations 2. perform activity analysis, basic self-care and work assessment 3. describe the change of occupations in different contexts and life span development
Intended Learning Outcomes	***On successful completion of this subject, a student will be able to:*** <u>*Professional/academic knowledge and skills*</u> a. describe the conceptual base of occupational role development and its relevance to occupational therapy practice b. describe the development of occupational roles in infancy, childhood, adolescence, adulthood and the aged within a socio-cultural context c. describe role transitions and development of human occupations associated with various stages of role development across the lifespan d. describe the adaptive behaviours necessary for competent role performance e. examine the development of performance components required for human occupations performance, i.e. self-maintenance, productivity, schooling, play and leisure, across the lifespan from various theoretical perspectives f. describe the basic principles in identifying dysfunctions in self-maintenance, productivity, schooling, play and leisure g. demonstrate basic competence in assessing dysfunctions in self-maintenance, productivity, schooling, play and leisure h. demonstrate basic competence in occupational analysis and activity analysis i. describe how human beings change over time as a result of normal developmental processes j. describe the impact of disability on role development and human occupations across the lifespan <u>*Attributes for all-roundedness*</u> k. Describe how human beings change over time as a result of normal developmental processes. l. Describe the impact of disability on role development and human occupations across the lifespan. m. Demonstrate skills in presentation and report writing.

<table>
<tr><td>Subject Synopsis/ Indicative Syllabus</td><td>Introduction to Human Occupations: Definitions, concepts, history and therapeutic values

Occupational Performance: Domains of Concern
• Self-maintenance
• Productivity
• Schooling
• Leisure
• Play
• Sleep, Rest & Spirituality
• Occupational balance

Occupational Role Development Across Lifespan
• Infancy & Childhood
• Adolescence
• Adulthood
• Older adulthood
• Towards the end of life</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>Lectures will cover the theory and principles of occupations performance and the occupational role development across life span. During tutorials sessions, students will discuss occupational analysis, activity analysis, ADL assessment, use of assistive devices, and practice different kinds of work samples and evaluation tools, as well as play and recreational activities.

Practical sessions include visits to school, vocational and hospice settings. E-learning will be used in open-book online quiz and self-learning. Web-based learning allows student to learn the knowledge and enhance their clinical problem ability at their own time.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/ tasks</td><td rowspan="2">% weigh t-ing</td><td colspan="13">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td><td>g</td><td>h</td><td>i</td><td>j</td><td>k</td><td>l</td><td>m</td></tr>
<tr><td>Exam-ination</td><td>40</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td><td>✓</td><td></td></tr>
<tr><td>2 Case studies, Group presentation & report</td><td>30</td><td>✓</td><td></td><td></td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td><td></td><td></td><td>✓</td><td>✓</td></tr>
<tr><td>Mini online quiz X2</td><td>30</td><td></td><td>✓</td><td>✓</td><td></td><td></td><td></td><td></td><td></td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="13"></td></tr>
</table>

Examination
Essay-type questions– measure students’ cognitive achievement in</td></tr>
</table>

<table>
<tr><td></td><td colspan="2">understanding human occupations.

<u>Case study</u>
Group presentation and report – uses authentic settings (real cases on disability or elderly) which enhances students' interpersonal skills and communication skills (with patients), and group working skills (with peers).

<u>Mini online quiz</u>
Two mini online quizzes (45 MCQs, Open Book) – measure students' cognitive achievement in understanding human occupations.</td></tr>
<tr><td rowspan="6">Student Study Effort Expected</td><td>Class contact:</td><td>(56 Hrs.)</td></tr>
<tr><td>▪ Lecture</td><td>28 Hrs.</td></tr>
<tr><td>▪ Tutorial</td><td>28 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(44 Hrs.)</td></tr>
<tr><td>▪ Literature review</td><td>14 Hrs.</td></tr>
<tr><td>▪ Group discussion</td><td>30 Hrs.</td></tr>
<tr><td>Total student study effort</td><td><u>100 Hrs.</u></td></tr>
<tr><td>Reading List and References</td><td colspan="2"><u>Required texts:</u>
Bee, H.L., & Boyd, D. (2015). Lifespan Development. 7th Edition. New York, NY: Allyn & Bacon.

Pendleton, H. M., & Schultz-Krohn, W. (2013). Pedretti's Occupational Therapy – Practice skills for physical dysfunction (7th ed.). St. Louis: Elsevier.

Radomski, M. V., & Trombly Latham, C. A. (2014). Occupational Therapy for Physical Dysfunction (7th ed.). Baltimore: Lippincott Williams & Wilkins.

<u>Recommended texts:</u>
AOTA (2008). Occupational Therapy practice framework: Domain & Process (2nd ed.). American Journal of Occupational Therapy, 62(6), 625-683.

Kramer, P., Hinojosa, J, & Royeen, C.B. (2003). Perspectives in human occupation: Participation in life. Philadelphia: Lippincott Williams & Wilkins.

Law, M., Naum, C., & Dunn, W. (2001). Measuring occupational performance. Thorofare: Slack.

Schell, B. A. B., Gillen, G., & Scaffa, M. E. (2014). Willard & Spackman's Occupational Therapy (12th ed.). Philadelphia: Lippincott Williams & Wilkins.</td></tr>
</table>

YEAR 1 SYLLABUS
SEMESTER 2

Subject Code	**RS5303**
Subject Title	**RESEARCH METHODS AND STATISTICS**
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	The subject is designed to provide the students with a basic level of understanding of the process of critical inquiry, research methodology, statistical concepts and data analysis.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** <u>Professional/academic knowledge and skills</u> a. Explain the concept of systematic inquiry and its application to the health care field with specific reference to rehabilitation services. b. Explain the fundamental concepts related to different aspects of research methodology (study designs, sampling, measurement issues). c. Select proper methods of data coding, recording, and analysis for a given investigative design. d. Use the statistical package for social science (SPSS) to conduct data analysis properly. e. Correctly present and interpret the results of the statistical analysis of a given set of data. f. Perform critical appraisal of scientific literature in the field of rehabilitation.
Subject Synopsis/ Indicative Syllabus	• Process of critical inquiry (formulation of research question, literature research, critical appraisal of literature, designing a research project) • Sampling techniques • Concepts of measurement (Reliability, validity, variables, bias) • Basic statistical concepts • Quantitative research methods • Qualitative research methods • Evidence-based practice • Research ethics • Central Limit Theorem • Probability • Descriptive and inferential statistics • Parametric and non-parametric statistics • Hypothesis testing • t-test • Analysis of variance • Correlation and regression analysis • Analysis of reliability and validity of measurement tools

<table>
<tr><td></td><td>

- Epidemiology
- Analysis of qualitative data

</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>A blended learning approach will be used. Online lectures are used to highlight the principles of critical inquiry, theory building, design of investigative studies, data analysis and statistical methods. Activity-based laboratory sessions provide experiential learning. Review seminars are used to reinforce the key concepts delivered in online lectures.
Students are also given opportunities to use computer-based search strategies for the professional and scientific literature (e.g., Internet, library resources, CD-ROM, etc.) in the tutorials. A practical component will be used for the application and discussion of these principles. A laboratory handbook with step-by-step instructions will be provided to guide the students in the use of computer software (SPSS) for data analysis, and will allow the students to acquire the necessary skills in statistical analysis independently. Seminar presentations are conducted to enhance the students' abilities to critically appraise journals and articles through discussion and presentation.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>

<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="6">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td></tr>
<tr><td>Written test</td><td>50</td><td>√</td><td>√</td><td>√</td><td></td><td>√</td><td>√</td></tr>
<tr><td>Written assignment</td><td>20</td><td></td><td></td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Group seminar presentation</td><td>30</td><td></td><td>√</td><td>√</td><td></td><td>√</td><td>√</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="6"></td></tr>
</table>

Written test: This aim of this assessment is to evaluate the students' understanding of all the major concepts learned in the semester.

Written assignment: The students are required to integrate what is learned throughout the semester and perform a statistical analysis of a given set of data and write up a report.

Group seminar presentation: The students are required to integrate what is learned throughout the semester and perform a critical appraisal of a scientific journal paper.

</td></tr>
<tr><td>Student Study Effort Expected</td><td>

<table>
<tr><td>Class contact:</td><td>(31 Hrs.)</td></tr>
<tr><td>▪ Seminar</td><td>9 Hrs.</td></tr>
<tr><td>▪ Laboratory</td><td>22 Hrs</td></tr>
<tr><td>Other student study effort:</td><td>(78 Hrs.)</td></tr>
</table>

</td></tr>
</table>

	▪ Online lectures	22 Hrs.
	▪ Self-guided tutorials	10 Hrs.
	▪ Written assignment	6 Hrs.
	▪ Group seminar presentation	20 Hrs.
	▪ Self-study for written test	20 Hrs.
	Total student study effort	**109 Hrs.**
Reading List and References	**Required textbook:** Berg KE, Latin RW. Essentials of research methods in health, physical education, exercise science, and recreation. 3rd ed. Philadelphia: Wolters Kluwer/ Lippincott Williams & Wilkins; 2008. **Reference texts:** Barbour RS. Introducing Qualitative Research: a Student's Guide to the Craft of Doing Qualitative Research. London: Sage Publications; 2008. Berg BL. Qualitative Research Methods for the Social Sciences. Boston, MA: Pearson/Allyn & Bacon; 2007. Huizingh E. Applied Statistics with SPSS. London: Sage Publications; 2007. Knowles JG, Cole AL. Handbook of the Arts in Qualitative Research: Perspectives, Methodologies, Examples, and Issues. Los Angeles: Sage Publications; 2008. Leary MR. Introduction to Behavioral Research Methods. Boston, MA: Allyn and Bacon; 2008. Levin J. Elementary Statistics in Social Research: the Essentials. Boston: Pearson Allyn & Bacon; 2007. Peacock JL. Presenting Medical Statistics from Proposal to Publication: a Step-by-Step Guide. Oxford, New York: Oxford University Press; 2007. Portney LG, Watkins MP. Foundations of clinical research: applications to practice. 3rd ed. Upper Saddle River, NJ: Pearson/ Prentice-Hall Inc; 2009. Rubin A. Statistics for Evidence-based Practice and Evaluation. Belmont, CA: Thomson Higher Education; 2007. Willis J. Foundations of Qualitative Research: Interpretive and Critical Approaches. Thousand Oaks: Sage Publications; 2007.	

Subject Code	**RS5305**
Subject Title	**REHABILITATION PSYCHOLOGY**
Credit Value	3
Level	5, Year 1-Semester 2
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	This subject introduces the key psychosocial theories for understanding the processes of adjustment to trauma, disability, and illness. It also prepares students to examine their values of helping, to develop basic interviewing skills needed in building a helping relationship with clients, and to facilitate psychological adjustment in clients. Students are expected to develop competencies in communicating and understanding psychosocial issues of patients, and facilitate psychological and social adjustment when managing patients with physical and mental disabilities or chronic diseases.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: Professional/academic knowledge and skills a. demonstrate effective communication skills in interviewing a person with disabilities or chronic illness. b. evaluate the impact of trauma, disability, and chronic illness, by applying appropriate psychological theories. c. explain the principles and strategies the facilitation of psychosocial adjustment to illness or disability. d. recognize common with mental health issues in patients in the rehabilitation process. e. understand how rehabilitation interventions (esp. physiotherapy and occupational therapy) could facilitate the psychosocial well-being of persons with physical and/or mental health problems.
Subject Synopsis/ Indicative Syllabus	<u>Psychological Adjustment to Trauma, Disability, and Chronic Illness</u> 1. Psychological impact of trauma, disability, and chronic illness 2. Theories on psychological adjustment a) Stress and coping b) Body image and self-concept c) Loss, grief, and adjustment d) Self-efficacy and self-management 3. Aspects of psychosocial adaptation a) Social attitude toward persons with disabilities b) Vocational behaviour c) Family and social support d) Intimacy and sexuality 4. Psychological aspects of specific disorders • Developmental disabilities, e.g. learning disabilities, neuromuscular disorders • Physical disabilities, e.g. stroke, spinal cord injuries • Chronic illness, e.g. rheumatoid arthritis, diabetes

<table>
<tr><td></td><td>
<u>The Helping Relationship and Interviewing Skills</u>
1. The therapeutic relationship
2. Personal values, impression management and helping
3. Effective communication and interviewing skills: listening, asking, and guiding skills and collaborative action planning

<u>Mental Health Issues in Rehabilitation</u>
1. Attitude towards psychiatric illness
2. Commonly seen emotional and psychiatric disorders in rehabilitation
a) Anxiety and adjustment disorders
b) Mood disorders
c) Substance abuse
3. Role of rehabilitation health care professionals (including physiotherapists and occupational therapists)'s role in handling psychological issues in patients with physical disabilities or chronic diseases, and mental health issues.
</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>
Lectures will cover the theory and principles of psychology adjustment and adaptation to disabilities and chronic illnesses, illustrated with video shows and case studies.

During tutorials sessions, students will be guided to analyse based on video clips of interviews of patients, or conduct live interviews with persons with disability in class. Using written exercises and role plays, students will practice interviewing skills. Disability awareness exercise are used to help student reflect on their own attitude toward persons with disabilities and their acceptance toward them.
</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/ tasks</td><td rowspan="2">% weighting</td><td colspan="4">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td></tr>
<tr><td>Multiple choice quizzes</td><td>50</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Case Seminar presentation</td><td>30</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Interviewing Skills Assessment</td><td>20</td><td>✓</td><td>✓</td><td></td><td></td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="4"></td></tr>
</table>

Multiple choice quizzes to examine students' knowledge on theories of psychological adjustment and social adaptation to health conditions and disabilities, covering all topics in the subject.

Seminar presentation This is a group project in which students conduct interview with a person with chronic illness or disability. They need to conduct a case analysis of client's psychological adjustment and community adaptation, and then present it during a seminar.
</td></tr>
</table>

	Interviewing Skills Assessment Students are required to demonstrate their competence in basic patient interviewing skills in short online written assignments, and in a role play assessment. During role play assessment, student will take turn to perform role play as interviewer and patients according to case information. We would assess student's interviewing skills based on their performance as interviewers in the role play.	
Student Study Effort Expected	***Class contact:***	***(40 Hrs.)***
	▪ Lectures	26 Hrs.
	▪ Tutorials/practical	14 Hrs.
	Other student study effort:	***(65 Hrs.)***
	▪ Interview with patients	5 Hrs.
	▪ Group discussion/preparation of seminar presentation	25 Hrs.
	▪ Written assignment	10 Hrs.
	▪ Self-study	25 Hrs.
	Total student study effort	**105 Hrs.**
Reading List and References	**Key texts** Egan, G., & Reese, R.J. (2018). *The skilled helper: a problem-management and opportunity-development approach to helping*. (11th ed.) Belmont, CA USA: Cengage Learning. Martz, E, & Livheh, H. (Eds.). (2007). *Coping with chronic illness and disability: Theoretical, empirical, and clinical aspects*. New York: Springer. **References** Chan, Fong, Berven, Norman L., & Thomas, Kenneth R., (Eds.) (2015). *Counseling theories and techniques for rehabilitation and mental health professionals,* (2nd ed.). Sl: Springer Publishing Company. DeVellis, B. M., & DeVellis, R. F. (2001). Self-efficacy and health. In R. G. Frank (Ed). Rehabilitation. In A. Baum, T. A. Revenson, & J. E. Singer (Eds.) *Handbook of health psychology* (pp.235-247). NJ, USA: Lawrence Erlbaum. Drench, M. E., Noonan, A. C., Sharby, N., Ventura, S. H. (2007). *Psychosocial aspects of health care*. (3rd ed.). Upper Saddle River, NJ, USA: Pearson Prentice Hall. Frank, R.G, Rosenthal, M., & Caplan, B. (Eds.) (2010). *Handbook of rehabilitation psychology* (2nd Ed.). Washington, DC, USA: American Psychological Association. Glover-Graf, N. N., Millington, M., & Marini, I. (2011). *Psychosocial Aspects of Disability: Insider Perspectives and Strategies for Counselors.* USA: Springer**.** Gutman, S. A. (2005). *Living with illness or disability: 10 lessons of acceptance, understanding, and perseverance*. AOTA Press, The American Occupational Therapy Association, Inc. Livneh, H., & Antonak, R. F. (2005). Psychosocial adaptation to chronic illness and disability: A primer for counselors. *Journal of Counseling & Development*, *83*(1), 12-20.	

	Robertson, S. E. & Brown, R. I. (1997). *Rehabilitation counselling: Approaches in the field of disability* (2nd Ed.). Cheltenham, England: Stanley Thornes. Rollnick, S., Miller, W. R., & Butler, C. (2008). *Motivational interviewing in health care: helping patients change behavior*. Guilford Press. 江瓊珠《是我又如何：十八位長期病患者的抗病經歷》香港：香港復康會社區復康網絡，1999 年。

Subject Code	**RS5351**
Subject Title	**Clinical Sciences in Developmental Conditions**
Credit Value	2
Level	5, Year 1 – Semester 2
Pre-requisite	RS5355 OT Foundations in Human Performance
Objectives	To develop students' knowledge and empathy in rehabilitation to the needs of children and adults with developmental disabilities.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a. Develop clinical reasoning skills to analyze the causes and possible risk factors and compare the diagnostic related behaviour b. Observe and record clinical behaviour c. Prepare and present the clinical behavior of assigned cases making use of own critical thinking (verbally and in written format) d. Demonstrate an awareness of local and international service development trends that may influence the wellbeing of people with developmental disabilities and their families e. Show and share empathy with people with developmental disabilities and their family members
Subject Synopsis/ Indicative Syllabus	1. pre-natal, peri-natal, post-natal risk factors from biological, psychological and social perspectives; 2. diagnostic related behaviour of developmental disabilities – pre-maturity, cerebral palsy, mental handicap, developmental delay, muscular dystrophy, specific learning disabilities, autism and Asperger syndrome; 3. the needs of people with developmental disabilities and their families at different developmental stages; 4. the impact of developmental disabilities on a person's occupational roles and community integration; 5. structure and related issues of the local and international service provision for people with developmental disabilities and their families.
Teaching/Learning Methodology	Lectures will cover the knowledge in the clinical conditions and management. In seminars sessions, students will discuss clinical reasoning and demonstrate the awareness of service developmental trends. In fieldwork visits, students will observe cases assigned and learn the clinical behavior. There is also case

<table>
<tr><td></td><td>presentation to enable students to apply their theory and knowledge learnt and observed into clinical practice. Self-reflection will be engaged especially on sharing the empathy with the cases and family. Web-based learning allows student to learn the knowledge and enhance their clinical problem ability at their own time.

a. Lecture; Seminar; e-learning
b. Group work: Student observation plan and questions
c. Fieldwork visits: Visit the assigned case and observe for clinical behaviour
d. Case presentation with written work
e. Self reflection</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td>Specific assessment methods/tasks</td><td>% weighting</td><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td></tr>
<tr><td>1. 2 MCQs quizzes</td><td>40%</td><td>√</td><td></td><td></td><td>√</td><td></td></tr>
<tr><td>2. Case Presentation and written work (Group)</td><td>20%</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>3. Written test</td><td>40%</td><td>√</td><td></td><td></td><td>√</td><td>√</td></tr>
<tr><td>Total</td><td>100 %</td><td></td><td></td><td></td><td></td><td></td></tr>
</table>

Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:

MCQs: This assessment aims to assess students understanding of pathology and management of people with developmental dysfunctions.
Case presentation and written work: This assessment aims to evaluate students ability to critically analyze and report on their observation of case assigned in both verbal and written format.
Written test: Same as in MCQ, this assessment aims to assess students thorough understanding of pathology and management of people with developmental dysfunctions. In addition, students are assessed on their clinical reasoning.</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td></td></tr>
<tr><td>▪ Lecture</td><td>18Hrs.</td></tr>
<tr><td>▪ Seminar</td><td>10Hrs.</td></tr>
<tr><td>▪ Fieldwork</td><td>6Hrs.</td></tr>
</table>
</td></tr>
</table>

	Other student study effort:	
	▪ Self-study	80Hrs.
	Total student study effort	114Hrs.
Reading List and References	***Required text:*** • Batshaw, M.L., Pellegrino, L., & Roizen, N.J. (2013). (7th ed). *Children with disabilities*. Baltimore, MD: Paul H. Brookes Pub. **Recommended reading:** American Occupational Therapy Association (2004). *Adults with Developmental Disabilities: Current Approaches in Occupational Therapy* (Rev. ed.). Bethesda, MD: American Occupational Therapy Association, Inc. Beirne-Smith, M., Patton, J.R. & Kim, S.H. (2006). *Mental Retardation: An Introduction to Intellectual Disabilities*. Upper Saddle River, N.J.: Pearson/Merrill Prentice Hall. Case-Smith, J. (2005). *Occupational Therapy for Children* (5th ed.). St. Louis: Elsevier Mosby. Cech, D.J. & Martin, S. (2012) *Functional Movement Development Across the Life Span* (3rd edition). St. Louis, Missouri: Elsevier Saunders. Chandler, B. E. (1997). *The Essence of Play: a Child's Occupation*. MD: American Occupational Therapy Association. DeGangi, G. (2000). *Pediatric Disorders of Regulation in Affect and Behavior: a Therapist's Guide to Assessment and Treatment*. San Diago: Academic Press. Gesell, A.L. (1934). *Infancy and Human Gorwth*. New York: Macmillian. Graziano, A.M. (2002). *Developmental Disabilities: Introduction to a Diverse Field*. Boston: Allyn and Bacon. Hardman, M. L., Drew, C. J. & Egan, W. W. (2005). (8th ed.). *Human Exceptionality: Society, School and Family*. Boston: Allyn & Bacon. Heller, K.W., Forney, P.E., Alberto, P.A., Best, S.J. & Schwartzman, M.N. (2009). *Understanding physical, health, and multiple disabilities.* (2nd ed). Columbus: Pearson Ed. Lerner, J.W., Lowenthal, B. & Egan, R. (2003). *Preschool*	

children with special needs: children at risk and children with disabilities. (2nd ed) Boston: Allyn and Bacon.

Nickel, R.E. & Desch, L.W. (2000). *The physician guide to caring for children with disabilities and chronic conditions.* Baltimore, MD: Paul H. Brookes.

Parham, L. D. & Fazio, L. S. (2008). (Eds.). *Play In Occupational Therapy For Children.* St. Louis: Mosby Elsevier.

Piek, J.P. (2006). *Infant motor development.* Perth, Australia: Human Kinetics.

Poon, M.Y.C., Wong, S.K.F., & Ng R.S.H. (2006) *Occupational Therapy Treatment for Children with Specific Learning Difficulties*. Hong Kong: Hong Kong Occupational Therapy Association.

Santrock, J.W. (2011). *Child Developmental* (13th edition). New York: Mc-Graw- Hill Companies, Inc

Scheiman M., & Rouse M.W. (2006) *Optometric management of learning-related vision problems*. St Louis, MO.: Mosby-Elsevier.

Scheiman M. & Wick B. (2008) *Clinical management of binocular vision*. Philadelphia, PA.: Lippincott Williams & Wilkins.

Slaggert, K. & Jongsma, A. E. (2000). *The Mental Retardation and Developmental Disability Treatment Planner*. New York: John Wiley & Sons, Inc.

Wolf, L. S. & Glass, R. P. (1992). *Feeding and Swallowing Disorders in Infancy: Assessment and Management.* Tuscon: Therapy Skill Builders.

Subject Code	**RS5352**
Subject Title	**CLINICAL SCIENCES IN MUSCULOSKELETAL CONDITIONS**
Credit Value	3
Level	5, Year 1 – Semester 2
Pre-requisite	RS5308 Functional Anatomy
Objectives	To develop students' knowledge in rehabilitation to the needs of people with musculo-skeletal conditions.
Intended Learning Outcomes *(Note 1)*	Upon completion of the subject, students will be able to: a. Understand common clinical pathology, clinical investigation and management b. Critically analyze the information in 'a' in relation to common case scenario c. Develop and apply critical thinking skills in relating knowledge taught
Subject Synopsis/ Indicative Syllabus *(Note 2)*	1. Pathological processes underlying disorders in bone, soft tissues, and peripheral nervous systems. 2. Common clinical investigations and management for musculo-skeletal disorders. 3. Causative factors in physical disability relevant to musculo-skeletal disorders. 4. Common clinical conditions and effects of development and aging (etiology, clinical manifestation, differential diagnosis, and multi-disciplinary clinical management): ▪ Fractures ▪ Soft-tissue injuries ▪ Upper limb injuries ▪ Lower Limb injuries ▪ Amputation ▪ Hand injuries ▪ Burns ▪ Arthritic diseases and rheumatoid diseases ▪ Paediatric Musculo-skeletal conditions ▪ Spinal cord injuries ▪ Low back pain

<table>
<tr><td>Teaching/Learning Methodology
(Note 3)</td><td>Lectures will cover the knowledge in the clinical conditions and management. In seminars sessions, students will discuss clinical reasoning and apply critical thinking skills in relating knowledge taught.

Web-based learning allows student to learn the knowledge and enhance their clinical problem ability at their own time.

a. e-learning and lectures
b. Seminar</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes
(Note 4)</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="6">Intended subject learning outcomes to be assessed (Please tick as appropriate)</td></tr>
<tr><td>a</td><td>b</td><td></td><td></td><td></td><td></td></tr>
<tr><td>1. Three MCQ tests</td><td>40</td><td>√</td><td>√</td><td></td><td></td><td></td><td></td></tr>
<tr><td>2. Written test</td><td>60</td><td>√</td><td>√</td><td></td><td></td><td></td><td></td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="6"></td></tr>
</table>

Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:

MCQs: This assessment aims to assess students understanding of pathology and management of people with musculo-skeletal conditions, in relation to different case scenarios

Written test: Same as in MCQ, this assessment aims to assess students understanding of pathology and management of people with musculo-skeletal conditions. In addition, students are assessed on their clinical reasoning</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td></td></tr>
<tr><td>▪ Lecture</td><td>28 Hrs.</td></tr>
<tr><td>▪ Seminar</td><td>14 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td></td></tr>
<tr><td>▪ Self-study</td><td>80 Hrs.</td></tr>
<tr><td>Total student study effort</td><td>122 Hrs.</td></tr>
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</td></tr>
</table>

Reading List and References	**Textbooks:** Solomon, L., Warwick, D.J., & Nayagam, S. (2010). *Apley's System Of Orthopaedics And Fracture* (9th ed.). London: Arnold. **Recommended Textbooks:** Adams, J. C., & Hamblen, D. L. (2001). *Outline of Orthopaedics* (13th ed.). Edinburgh: Churchill Livingstone. Cech, D., & Martin, S. (2002). *Functional Movement Development Across The Life Span*. Philadelphia: Saunders. Dutton, R. (1995). *Clinical Reasoning In Physical Disabilities*. Baltimore: Williams & Wilkins. Melvin, J. L. (2000*). Adult Rheumatic Diseases*. Bethesda: AOTA. Trombly, CA., & Radomski, MV. (2002). *Occupational Therapy for Physical Dysfunction* (5th ed.). Baltimore: Williams and Wilkins. **Reading List:** Dellon, A. L. (1988). *Evaluation of Sensibility and Re-Education of Sensation in the Hand*. Baltimore: Lucas. Dieppe, P.A., Doherty, M., Macfarlane, D., & Maddison, P. (2001). *Rheumatological Medicine.* Edinburgh: Churchill Livingstone. Deusen, J. V., & Brunt. D. (1997). *Assessment in Occupational Therapy and Physical Therapy*. Philadelphia: Saunders. Hoppenfeld, S., & Murthy, V. L. (2000). *Treatment and Rehabilitation of Fractures*. Philadelphia: Lippincott Williams & Wilkins Hunter, J. M., Mackin, E. J., & Callahan, A. D. (2002). *Rehabilitation of the Hand* (5th ed.). St. Louis: C. V. Mosby Co. Kielholfner, G. (2004). *Conceptual Foundations of Occupational Therapy* (3rd ed.). Philadelphia: F.A. Davis. Magee, D. J. (2002). *Orthopedic Physical Assessment* (4th ed.). Philadelphia: Saunders. Malick, M. H., & Kasch, M. C. (1984). *Manual on Management of Specific Hand Problems*. Pittsburgh: AREN. McRae, R., & Esser, M. (2002). *Practical Fracture Treatment*.

	Edinburgh: Churchill Livingstone. Mercier, L. R. (2000). *Practical Orthopaedics* (5th ed.). St. Louis: Mosby. Reed, K. L. (1991). *Quick Reference to Occupational Therapy*. Gaithersburg, Maryland: Aspen Publishers, Inc. **Students web learning:** E-learning web site: http://www.rs.polyu.edu.hk/e-learning/ WebCT based lecture notes / slides: http://webct.polyu.edu.hk/ **Student instruction manuals:** Li, W.P.C., & Chung, C.C.J. (1997). *Hand Function Assessment for Occupational Therapy Students.* Hong Kong: The Hong Kong Polytechnic University.

Subject Code	**RS5360**
Subject Title	**OT FOR PHYSICAL DYSFUNCTION I (MUSCULOSKELETAL CONDITIONS)**
Credit Value	4
Level	5, Year 1-Semester 2
Pre-requisite	RS5355 OT Foundations in Human Performance
Co-requisite	RS5352 Clinical Sciences in Musculoskeletal Conditions
Objectives	To equip student with clinical knowledge and practical skills in rehabilitation of people with common musculoskeletal injuries.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a. Explain the roles of occupational therapists in the rehabilitation of patients with musculoskeletal problems; b. Assess patients' changes in physical and functional status following injuries and illnesses, using appropriate standardized tools and equipment; c. Demonstrate the use of specific occupational therapy approaches in the management of various types of patients with musculoskeletal injuries; d. Demonstrate specific occupational therapy intervention strategies and modalities to enhance patients' functional performance in daily living tasks, work and leisure pursuits; and e. Document the results of assessment and progress of patients in both physical and occupational performance.
Subject Synopsis/ Indicative Syllabus	Theoretical framework of occupational therapy practice in musculoskeletal rehabilitation - Function-dysfunction continuum in Human Occupation model - Occupational performance model Common approaches in rehabilitation of patients with musculo-skeletal conditions - Biomechanical approaches - Rehabilitative approaches Common O.T. evaluation in musculoskeletal conditions Clinical / Provocative Examination Management of various musculoskeletal conditions commonly seen in Hong Kong: 1. Fractures and Dislocation, soft tissue injuries 2. Joint diseases: rheumatoid and arthritic conditions 3. Burn injuries and other vascular diseases 4. Upper limb and Hand injuries 5. Lower limb injuries 6. Spinal cord injuries, Spine problem (Neck & Low back)

<table>
<tr><td></td><td>7. Amputations & Replantation
8. Geriatric orthopaedic conditions
9. CTD/RSI/soft tissue injuries
10. Sports related injuries</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>a. Lecture
b. Practical sessions
c. Clinical visits/Teleconferences
d. Case discussion
e. Seminar presentation</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><th rowspan="2">Specific assessment methods/tasks</th><th rowspan="2">% weighting</th><th colspan="6">Intended subject learning outcomes to be assessed (Please tick as appropriate)</th></tr>
<tr><th>a</th><th>b</th><th>c</th><th>d</th><th>e</th><th>f</th></tr>
<tr><td>1. Examination</td><td>40%</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>2. Seminar presentation</td><td>20%</td><td></td><td>√</td><td></td><td></td><td></td><td></td></tr>
<tr><td>3. Practical tests</td><td>40%</td><td></td><td></td><td>√</td><td>√</td><td>√</td><td></td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="6"></td></tr>
</table>

Examination consists of short and essay questions assessing all of the intended learning outcomes and overall understanding of occupational therapy management for people with musculoskeletal conditions.

Seminar presentation is used to enhance students' abilities in integrating theories, treatment principles and techniques in the management of patients with musculoskeletal conditions.

Practical tests aim to further consolidate students' integration of learnt treatment principles and practical skills in management of patients with musculoskeletal conditions.</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td>82 Hrs</td></tr>
<tr><td>▪ Lecture</td><td>26 Hrs.</td></tr>
<tr><td>▪ Practical/Lab</td><td>52 Hrs.</td></tr>
<tr><td>▪ Teleconference/case presentation</td><td>4 Hrs</td></tr>
<tr><td>Other student study effort: (please fill-up)</td><td>50 Hrs.</td></tr>
<tr><td>▪ Clinical skill open lab</td><td>30 Hrs.</td></tr>
<tr><td>▪ E-CASE clinical learning/self study</td><td>20 Hrs.</td></tr>
<tr><td>Total student study effort</td><td>132 Hrs.</td></tr>
</table>
</td></tr>
<tr><td>Reading List and References</td><td>Textbook:
Magee, D.J. (2008). Orthopaedic physical assessment (5th Ed.). St.</td></tr>
</table>

	Louis, Saunders Elsevier. Pedretti, L.W., & Early, M.B. (Eds.) (2013). *Occupational Therapy: Practice skills for physical dysfunction*. (7th ed.). St. Louis: C.V. Mosby. Radomski, M.V. and Trombly, C.A. and (2013). *Occupational Therapy for Physical Dysfunction*. (7th ed.). Baltimore: Williams and Wilkins. **Recommended Textbooks:** Christiansen, C. & Baum, C. (1997). *Occupational Therapy: Enabling Function and Well-Being, Thorofare,* NJ: Slack. Crepeau, E.B. (Eds.) (2009). *Willard and Spackman's Occupational Therapy*. (11th ed.). Philadelphia: J.B. Lippincott. Hunter, J. M., Mackin, E. J., & Callahan, A. D. (2008). Rehabilitation of the Hand (6th ed.). St. Louis: C. V. Mosby Co. Kapandji I. A. (2007). *The Physiology of the Joints, Volume 1: Upper Limb.* (6th ed.). Churchill Livingstone. Ronald M. F. & Max E. F. (2008). *Practical Fracture Treatment.* (5th ed.). Churchill Livingstone. Rybski, M. (2004). Kinesiology for occupational therapy. Thorofare, N.J.: Slack. Skirven,T.M., Osterman, A.L., Fedorczyk, J.M. & Amadio, P.C. (2011). Rehabilitation of the Hand and Upper Extremity. St. Louis, Mosby. The Pressure Therapy Manual Working Group (1995). *Pressure Therapy Manual.* Hong Kong: Occupational Therapy Co-ordinating Committee, Hong Kong Hospital Authority. The Splint Working Group. (1995). *The Splint Manual For Occupational Therapists.* (2nd ed.). Hong Kong: Occupational Therapy Co-ordinating Committee, Hong Kong Hospital Authority. Turner A., Foster, M., & Johnson, S. (2002). *Occupational Therapy and Physical Dysfunction: Principles, Skills and Practice* (5th edition). Edinburgh: Churchill Livingstone. **Reading List:** Chan, S. C. C., & Chan, A. P. S. (2013). One-year follow-up of Chinese people with spinal cord injury: A preliminary study. *Journal of Spinal Cord Medicine,* 36(1), 12-23. Cooper, C. (2007) *Fundamentals of Hand Therapy*. St. Louis,

	Mosby, Elesvier. Fess, E.E. & Philips, C.A. (1987). *Hand Splinting: Principles and Methods.* (2nd ed.). St. Louis: C.V. Mosby. Jacobs, K. (2005). *Ergonomics for Therapists*. (2nd ed.). Boston. Butterworth-Heinemann Lee, S.W. (1999). *Cervical Spinal Disorders: A Textbook for Rehabilitation Sciences Students*. Singapore:.Springer Mckee, P., & Morgan, L. (1998). *Orthotics in Rehabilitation: Splinting the Hand and Body*. Philadelphia: F.A. Davis Company. Van Lede, P., & van Veldhoven, G. (1998). *Therapeutic Hand Splints: A Rational Approach. (Vol. 1* ***& II)****.* Belgium: Provan bvba. Weiss, S. (2005). *Hand Rehabilitation: a quick reference guide and review.* (2nd ed.). Elsevier Mosby. Wilton, J. C. (1997). *Hand Splinting: Principles of Design And Fabrication*. Philadelphia, W.B. Saunders Company Ltd. **Students web learning:** Li, W.P.C. & Choi, S.M. J. (2000). *Splinting for occupational therapy students.* http://www.rs.polyu.edu.hk/splint/ Li, W.P.C., Chung, C.C.J., & Faulkner L.W. (2001). *Physical Assessment in Rehabilitation Sciences, Blackboard.* Li, W.P.C (2002). *Case Studies in Occupational Therapy for Physical Dysfunctions.* http://www.rs.polyu.edu.hk/case_study Li, W.P.C. (2011). E-case studies for students in Rehabilitation Education. http://www3.rs.polyu.edu.hk/caseman/index.html **Student instruction manuals:** Li, W.P.C. & Chung, C.C.J. (1997). *Hand Function Assessment for occupational therapy students*. Hong Kong: The Hong Kong Polytechnic University.

Subject Code	**RS5371**
Subject Title	**CLINICAL EDUCATION I**
Credit Value	3
Level	5, Year 1 – Semester 2
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	1. To provide students with the opportunity to identify functional problems encountered by clients of occupational therapy. 2. To guide students to conduct activity analyses and practise therapeutic activities. 3. To understand various forms of occupational therapy service or health care promotion activities delivered in primary health care settings. 4. To facilitate students to develop appropriate professional behaviour.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** a. abide to the professional code of ethics stipulated in the Supplementary Medical Professions Ordinance b. identify client's clinical problems and performance in terms of occupational function-dysfunction c. conduct activity / task analyses and practise therapeutic activities d. interact with clients and health care team member appropriate to the professional standard e. Participate in the planning and implementation of primary health care related activities, e.g. primary health care programmes, health promotion activities, for certain patient or community groups f. Utilize clinical reasoning and evidence-based practice in primary health care delivery g. search for relevant reference materials to enhance learning h. present both written and verbal reports
Subject Synopsis/ Indicative Syllabus	1. Development of community based rehabilitation, health promotion and education, function training programmes in community, school and work 2. Facilitation of injury prevention or reduction (injury prevention education and safety awareness) and independent living for clients/patients 3. Promotion of fitness, wellness and mental health clients/patients 4. Observation of the roles and functions of occupational therapists in clinical settings 5. Observation of clients' occupational performance in daily living tasks, work and leisure 6. Observation of holistic approach to occupational therapy process and teamwork approach 7. Observation of appropriate professional attitudes and manners

<table>
<tr><td></td><td></td></tr>
<tr><td>Teaching/Learning Methodology</td><td>
<u>Clinical Attachment and Visits</u>
a. Structured observations enable students to identify clients' clinical problems, functional competence and problems
b. Tutorials enable students to clarify queries and to learn topics relevant to the clinical practice
c. Contact with clients and staff under the guidance of clinical educators as a basis of developing professional attitudes and manners
d. Structured feedback from clinical educator facilitate students to reflect on own performance

<u>Primary health care related activities (please refer to Guidelines for Primary Care Project)</u>
a. Fieldwork provides the opportunity for students to participate or conduct primary care activities under a 35-hour service project. Students will be involved in health education and promotion activities in primary or community care setting under supervision of supervisor.
b. Students need to submit a log of their participation in primary care activities, write a summary and reflective journal for assessment.
</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="8">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td><td>g</td><td>h</td></tr>
<tr><td>Continuous towards overall grade</td><td>100</td><td colspan="8">As a whole</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="8"></td></tr>
</table>

Continuous assessments towards overall grade are appropriate as students' professional competence in terms of attitude, knowledge and skills are continuously developed and evaluated throughout the period of clinical education.
</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Clinical contact:</td><td>(175 Hrs.)</td></tr>
<tr><td>▪ Fieldwork practice in clinical setting</td><td>140 Hrs.</td></tr>
<tr><td>▪ Participation in Primary health care service project</td><td>35 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(50 Hrs.)</td></tr>
<tr><td>▪ Pre-and post-clinical seminars</td><td>5 Hrs.</td></tr>
<tr><td>▪ Self study</td><td>45 Hrs.</td></tr>
</table>
</td></tr>
</table>

	Total student study effort	**225 Hrs.**
Reading List and References	Bruce, M.A. & Borg, B. (1993). *Psychosocial Occupational Therapy: Frames of Reference for Intervention* (2nd ed). Thorofare, NJ: Slack, Inc. Dutton, R. (1995). *Clinical Reasoning in Physical Disabilities.* Baltimore, MD: Williams & Wilkins. Crepeau, E.B., Cohn, E.S., & Schell, B.A. (ed.) (2003). *Willard and Spackman's Occupational Therapy* (10th ed). Philadelphia, PA: Lippincott-Raven. Lamport, N. K. (2001). *Activity, Analysis and Application (*4th ed). Thorofare, NJ: Slack, Inc. Lamport, N. K., Coffey, M.S., & Hersch, G.I. (1993). *Activity Analysis Handbook* (2nd ed). Thorofare, NJ: Slack, Inc.	

YEAR 1 SYLLABUS
SEMESTER 3

Subject Code	**RS5354**
Subject Title	**CLINICAL SCIENCES IN PSYCHIATRIC CONDITIONS**
Credit Value	4
Level	5, Year 1 – Semester 3
Pre-requisite	Nil
Objectives	1. Use current theories to describe the aetiology and psychopathology of different psychiatric conditions. 2. Outline the current classification system and assessment methods for different psychiatric conditions. 3. Identify and describe the resultant psychosocial dysfunction of different psychiatric conditions in terms of occupation performance. 4. Describe the common treatment approaches and clinical management of people with different psychiatric conditions. 5. Identify and describe the clinical pictures of people living with psychiatric conditions in community settings
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** a. describe the clinical pictures and treatment approaches of common psychiatric conditions b. conduct generic mental health and psychiatric assessment (not OT specific) c. analyze how mental health and psychiatric conditions affect the functioning in community living
Indicative Syllabus	1. History and Concept of Psychiatry: Aetiology and Classification of Mental Illness 2. Different Approaches in Psychiatric Treatment & Assessment 3. Mental Health Service in Hong Kong 4. Schizophrenia and Other Psychotic Disorders 5. Mood Disorders 6. Personality Disorders 7. Eating Disorders 8. Substance-Related Disorders 9. Delirium, Dementia, Amnestic and other Cognitive Disorders 10. Child Psychiatry 11. Mental handicap with other psychiatric disorders 12. Community mental health over the life course 13. Housing, employment, supportive, prevention and promotion services for people with chronic mental health conditions and their family members
Teaching/Learning Methodology	**<u>Lecture</u>** Lectures will cover clinical characteristics of common psychiatric conditions in different age groups; suggested assessment tools would be introduced.

<table>
<tr><td></td><td><u>Tutorial</u> (e.g. video shows and guest speakers)
Tutorials will demonstrate the application of psychiatric conditions in various clinical context and non-OT specific assessment procedures for such conditions. Role-plays in the tutorial aim to facilitate client-centered perspective in understanding of psychiatric symptoms.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="3">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td></tr>
<tr><td>Quizzes</td><td>20</td><td>✓</td><td></td><td>✓</td></tr>
<tr><td>Case presentation</td><td>25</td><td></td><td>✓</td><td>✓</td></tr>
<tr><td>Visit reflections</td><td>10</td><td>✓</td><td></td><td>✓</td></tr>
<tr><td>Written testes</td><td>45</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="3"></td></tr>
</table>

Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:

<u>Quizzes</u>
Students would be assessment individually on knowledge and concepts taught in the form of short quizzes to apply psychiatric theories and describe psychopathology in OT psychosocial settings. The quizzes involve multiple choice questions and matching. Feedback would be given after each quiz to facilitate student’s learning.

<u>Case presentation</u>
Students would be assessed in groups in the form of an oral presentation and then a written report for the description, assessment, and management of psychiatric conditions at different stages (acute, remission) in appropriate settings (organized facilities, community settings) as demonstrated by tutorial clinical cases. Students would be assessed in the application of different assessment methods and psychiatric knowledge to clinical cases. Students Feedback would be given to facilitate student’s learning.

<u>Visit reflections</u>
Students would be assessed individually in the form of written reflections on each clinical visit regarding a) the experience of interaction with patients, and/or clinical staff/care-givers, in their understanding of the related mental health conditions; b) the impact of mental health conditions and the related health and social services on the patient; c) possible areas of improvement in the service and in themselves as future clinicians.

<u>Written tests</u>
Students would be assessed individually on identification of psychopathology, dysfunction; differentiation of treatment approaches across different psychiatric conditions; application of classification system, assessment methods for mental health conditions in both in-</td></tr>
</table>

<table>
<tr><td></td><td colspan="2">patient and community settings.</td></tr>
<tr><td rowspan="6">Student Study Effort Expected</td><td>Class contact:</td><td>(56 Hrs.)</td></tr>
<tr><td>▪ Lecture</td><td>38 Hrs.</td></tr>
<tr><td>▪ Tutorial</td><td>18 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(104 Hrs.)</td></tr>
<tr><td>▪ Weekly revision 6hrs x 14week
▪ Assignment preparation</td><td>84 Hrs.
20 Hrs.</td></tr>
<tr><td>Total student study effort</td><td><u>160 Hrs.</u></td></tr>
<tr><td>Reading List and References</td><td colspan="2"><u>Recommended text:</u>
Durand, V. M., &Barlow, D. H. (2006). Essentials of abnormal psychology. (4th Eds.). Belmont, CA: Thomson/Wadsworth.

Corrigan, P. W., Mueser, K. T., Bond, G. R., Drake, R. E., & Solomon, P. (2008). Principles and practice of psychiatric rehabilitation: an empirical approach. New York: Guilford Press.

<u>Key references:</u>
American Psychiatric Association (2000) Diagnostic and Statistical Manual of Mental Disorders: DSM-IV-TR. Washington: American Psychiatric Association.

Bonder, B.R. (2004) Psychopathology and Function (3rd Ed.), New Jersey, Slack Inc.,

Sadock, B.J. (2003) Kaplan & Sadock's synopsis of psychiatry: behavioral sciences/clinical psychiatry, Philadelphia, Pa.: Lippincott Williams & Wilkins

Stevens, L (2001) Psychiatry: an Illustrated Colour Text. Edinburgh: Churchill Livingstone

WHO (1998). ICD-10: International statistical classification of diseases and related health problems. Geneva: author.

Yau, M.K., Lam, P.C.W. & Siu, A.M.H. (2005) Psychosocial Dysfunction: A Learning Guide for Occupational Therapy Students. Hong Kong: Department of Rehabilitation Sciences, The Hong Kong Polytechnic University

<u>Recommended readings:</u>
Brichwod, M. and Jackson, C (2001) Schizophrenia. Philadelphia: Taylor & Francis Group

Chan, C. M. (2010). Recommendations on improving the mental health policy in Hong Kong - Expert panel for better community care of psychiatric patients in Hong Kong.</td></tr>
</table>

Care, E., & MacRae, A. (2005). *Psychosocial occupational therapy: A clinical practice.* Clifton Park, NY: Thomson Delmar Learning.

Friedman, J.H. & Duffy J.D. (1992). *Psychiatry/ Neurology: Pretest Self-Assessment and Review* (2nd ed.), New York: McGraw-Hill, Inc.

Gallagher, B. J. (2002) *The Sociology of Mental Illness (4th Ed.)* NJ: Prentice Hall

Hospital Authority. (2011). *Hospital Authority Mental Health Service Plan for Adults.*

Jones, P. & Buckley, P (2003) *Schizophrenia,* London: Mosby

Scaffa, M. E., Pizzi, M. A., & Chromiak, B. (2010). Promoting mental health and emotional wellbeing. In M. E. Scaffa, S. M. Reitz & M. Pizzi (Eds.), *Occupational therapy in the promotion of health and wellness* (pp. 329-349). Philadelphia: F.A. Davis Co.

Salter, M., & Turner, T. (2008). *Community Mental Health Care: A Practical Guide to Outdoor Psychiatry*: Churchill Liverstone

Tse, S., Siu, B. W., & Kan, A. (2011). Can Recovery-Oriented Mental Health Services be Created in Hong Kong? Struggles and Strategies. *Adm Policy Ment Health*. doi: 10.1007/s10488-011-0391-7

廣闊心空 : 一位精神科醫生的個案手記 / 葉恩明

CCMD-3 相關精神障礙的治療與護理 / 陳彥方主編

香港執業精神科醫生協會 (2008) 香港精神科服務指南。香港 ：星島出版有限公司

李子玉 (2008)《憂鬱病，就是這樣》。三聯書店(香港)有限公司。

李子玉 (2011)《憂鬱病並不可怕》。三聯書店(香港)有限公司。

李永堅 (2010) 《與壓力共處 : 精神科疾患個案分析》。香港 : 天地圖書有限公司

Recommended web sites for information and articles:

www.schizophrenia.com
www.mentalhealth.com
www.schizophrenia.org
www.nami.org
www.nimh.nih.gov
www.mentalwellness.com

Subject Code	**RS5357**
Subject Title	**OT THEORY AND PROCESS II**
Credit Value	3
Level	5, Year 1 - Semester 3
Pre-requisite / Co-requisite/ Exclusion	RS5356 OT Theory and Process I
Objectives	To develop a solid understanding of advanced theoretical concepts in occupational therapy and the ability to critically analyze the linkage between theory and practice.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a. Analyse and apply frames of reference in practice and critically reflect on and apply enabling occupation in local practice b. Apply core therapeutic approaches in occupational therapy; these include professional reasoning, reflective practice, client-centred approach, activity analysis, and therapeutic use of self and the environment c. Analyze the intervention and evaluation process in occupational therapy; these include evidence-based practice, safety precaution, and documentation of occupation-based intervention d. Discuss professional ethics, values, and responsibilities e. Communicate clearly and effectively, demonstrate self-directed learning ability and the ability to work in a collaborative team
Subject Synopsis/ Indicative Syllabus	1. Current trends of occupational therapy practice in local practice and around the world. 2. Types of clinical reasoning skills and reflective practice 3. Advanced application of activity analysis, therapeutic use of self and the environment in the intervention process 4. Formulation of OT assessment and interventions through the application of frames of references and therapeutic approaches 5. Roles and functions of occupational therapy in an interdisciplinary healthcare team 6. Code of practice and ethical concerns in OT practice
Teaching/Learning Methodology	Related concepts are grouped together and presented in a series of lectures, tutorials, and online resources. Learning of the concepts is reinforced and facilitated using online discussion, presentations, and individual and group assignments.

Assessment Methods in Alignment with Intended Learning Outcomes

Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)				
		a	b	c	d	e
1. Course work	50%	√	√	√	√	√
2. Examination	50%	√	√	√	√	√
Total	**100 %**					

The course work includes tutorial participation and individual and group assignments that focus on the analysis of theories in practice and development of essential skills in occupational therapy. The examination will evaluate the students' understanding and application of the concepts in practice scenarios.

Student Study Effort Expected

Class contact:	***42 Hrs.***
▪ Lecture	14 Hrs.
▪ Tutorial	28 Hrs.
Other student study effort:	***48 Hrs.***
▪ Self study	20 Hrs.
▪ Assignment	28 Hrs.
Total student study effort	**90 Hrs.**

Reading List and References

Required textbooks

1. Curtin, M. Molineux, M. & J. Supyk-Mellson, J. (2010), Occupational therapy and physical dysfunction: enabling occupation (sixth ed.). Edinburgh: Churchill Livingstone/Elsevier.
2. Sladyk, K. Jacobs, K. & MacRae, N. (2010), Occupational therapy essentials for clinical competence. Thorofare, NJ: SLACK Inc.

Recommended readings

1. Cole, M. B., & Tufano, R. (2008). Applied theories in occupational therapy: a practical approach. Thorofare, NJ: SLACK Inc.
2. Crepeau, E. B., Cohn, E. S., & Schell, B. A. B. (2009). Willard & Spackman's occupational therapy (11th ed.). Philadelphia, PA: Lippincott Williams & Wilkins.
3. Duncan, E. A. S. (2008). Skills for practice in occupational therapy. Edinburgh; New York: Elsevier.
4. Hinojosa, J., & Kramer, P. (2010). Frames of reference for pediatric occupational therapy (Vol. 3). Baltimore, Md.: Lippincott Williams & Wilkins.
5. Kielhofner, G. (2009). Conceptual foundations of occupational

	therapy practice (4th ed.). Philadelphia: F.A. Davis Co. 6. Schön, D. A. (1983). The reflective practitioner: how professionals think in action. New York: Basic Books. 7. Schell, B. A. B., & Schell, J. W. (2008). Clinical and professional reasoning in occupational therapy. Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins.

Subject Code	**RS5362**
Subject Title	**OT FOR PSYCHOSOCIAL DYSFUNCTIONS**
Status	5, Year 1-Semester 3
Credit Value	4
Pre-requisites	RS5305 Rehabilitation Psychology RS5355 OT Foundations in Human Performance
Co-requisite	RS5354 Clinical Sciences in Psychiatric Conditions
Learning Outcomes	*On successful completion of the subject, a student will be able to* ***Professional/academic knowledge and skills*** 1. apply relevant occupational therapy theories and frame of reference in case management of clients with psychosocial dysfunctions. 2. plan and implement occupational therapy programme in the areas of adult psychiatry 3. implement and review assessment methods and tools commonly adopted by occupational therapists in Hong Kong, which are relevant to practice of occupational therapy. 4. discuss roles of occupational therapists in different clinical settings, including: • Hospitals • Long term care facilities • Community based rehabilitation facilities 5. evaluate treatment techniques in psychosocial rehabilitation in terms of their evidence base
Learning Approach	<u>Total Contact Hours:</u> <u>60 Hours</u> Lecture 28 hours Tutorial 28 hours Field visit 4 hours Lectures will be delivered to cover the holistic management of resultant occupational dysfunction of clients suffering from different kinds of psychosocial dysfunctions and psychiatric conditions. Tutorials and case studies will be adopted for discussion on case management of clients suffering from specific psychiatric conditions. Practical sessions are for demonstration and practice of clinical skills in assessment, treatment and documentation of outcomes. Seminar presentation is used to enhance students' ability in integrating theories, treatment approaches and techniques in case management of patients with psychiatric conditions. Self-learning packages will be provided for students' self-directed

	learning. Students are also encouraged to refer to self-learning booklets and relevant web sites for learning.
Assessment (types & weighting)	100% Practical test 20% Written assignment & seminar presentation 40% Examination 40%
Syllabus (Indicative content)	1. Application of theories (e.g., Occupational Therapy models: Model of Human Occupation, Cognitive Disability model, Group Work Model, etc.) in assessment and treatment planning 2. Application of common psychosocial treatment techniques (e.g., behavioural management, cognitive-behavioural management, social skills training, family intervention, etc.) 3. Case management in adult psychiatry (e.g., schizophrenia, mood disorders, anxiety disorders, etc.) 4. Role of occupational therapist in different service models ▪ Hospitals ▪ Long-term care facilities ▪ Community-based psychiatric facilities 5. Review of assessment techniques & tools 6. Evidence base practice in psychosocial rehabilitation
Required Texts	Cara, E., & MacRae A. (1998). Psychosocial Occupational Therapy: A Clinical Practice. New York: Delmar Publishers. Christiansen, C. Baum, C. (1991) *Occupational Therapy: Overcoming Human Performance Deficits,* NJ: Slack Inc. Cottrell, R.P.F. (1993) *Psychosocial Occupational Therapy: Proactive Approaches,* AOTA Liberman, R.P. (2008) *Recovery from disability – Manual of psychiatric rehabilitation, Washington, DC: American Psychiatric Publishing, Inc* Pratt, C.W., et al. (2007) *Psychiatric rehabilitation*, MA : Elsevier Inc.
Recommended Reading	Borg, B. (1991) *The Group System: the therapeutic activity group in Occupational Therapy,* Thorofare, NJ: Slack Bruce, M.A. & Borg. B. (1997) *Occupational Therapy Stories: Psychosocial interaction in practice.* Thorofare, NJ: Slack Cole, M.B. (1993) *Group Dynamics in Occupational Therapy:*

	The Theoretical Basis and Practice Application of Group Treatment, Thorofare, NJ: Slack Inc. Creek, J. (2002) *Occupatio*nal Therapy in Mental Health (3rd Ed.), Edinburgh; New York: Churchill Livingstone Everett, T., Donaghy, M. & Feaver, S. (2003) Interventions for mental health : *an evidence-based approach for physiotherapists and occupational therapists,* Edinburgh ; New York : Butterworth-Heinemann Finlay, L. (2004) The *practice of psychosocial occupational therapy (3rd Ed.),* Cheltenham: Nelson Thornes Hong Kong Government (1996) *Hong Kong Review of Rehabilitation Programme Plan (1994/95 - 1998/99)* Hong Kong: Government Printer Hemphill, B.J. (1999) *Assessments in occupational therapy mental health: an integrative approach,* Thorofare, NJ: Slack Howe, M.C. (2001) *A functional approach to group work in occupational therapy (3rd Ed.),* Philadelphia: J.B. Lippincott Kielhofner, G. (2002) *A Model of Human Occupation: Theory and Application,* (3rd ed.) Baltimore: Williams & Wilkins. Lamport, N.K. (1989) *Activity Analysis Handbook.* Thorofare, N.J.: SLACK Inc. Law, M. C. Baum, C.M. & Dunn, W. (2003), *Measuring occupational performance: supporting best practice in occupational therapy,* Thorofare, N.J.: Slack. Martin, G. & Pear, J. (1995) *Behavior Modification: what is it and how to do it,* (5th ed.), Thorofare, NJ: Prentice-Hall International Editions. Scott, A. H. (ed.) (1998). New Frontiers in Psychosocial Occupational Therapy. *Occupational Therapy in Mental Health, 14* Numbers 1/2.
Recommended Web Sites for information and articles	www.schizophrenia.com www.mentalhealth.com www.mentalhealth.org www.nami.org www.mentalwellness.com www.nimh.nih.gov

Subject Code	**RS5372**
Subject Title	**CLINICAL EDUCATION II**
Credit Value	7
Level	5, Year 1 – Semester 3
Pre-requisites	RS5371 Clinical Education I
Objectives	This subject provides students with the opportunity to consolidate and apply occupational therapy knowledge, attitudes and skills learned in school to assess, plan, implement, evaluate, and modify occupational therapy interventions for clients suffering from common conditions in Hong Kong, under the guidance of clinical educators. It also provides students with the opportunity to communicate and function appropriately as a member of the health care team, and prepares students for the study of advanced studies in Year II.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** *Professional/academic knowledge and skills* a. abide by the professional code of ethics stipulated in the Supplementary Medical Professions Ordinance b. identify clients' problems in occupational performance resulting from developmental deficits, physical disabilities, mental illness or ageing c. apply occupational therapy knowledge and skills to assist clients to develop an adaptive cycle of occupational functions d. modify occupational therapy intervention programme designed for clients as required e. interact with clients and health care team member appropriate to the professional standard f. identify occupational therapy related problems encountered in the clinical field to prepare for further in-depth enquires and studies g. present verbal and written occupational therapy reports as one of the effective means of professional communications *Attributes for all-roundedness* h. search for and review relevant reference materials to enhance learning i. develop independent and active learning j. work with group mates and other members in the team in the learning activities k. present both written and verbal reports

<table>
<tr><td>Subject Synopsis/ Indicative Syllabus</td><td>1. Professional code of ethics and expectations of students' behaviours in clinical setting
2. Assessment of clients' occupational performance in daily living tasks, work and leisure, e.g. role checklist, checklist of daily living task, developmental checklist, interest checklist
3. Planning of intervention programme according to the problem identified
4. Implementation of occupational therapy activities and skills to improve the occupational performance of clients e.g. splint-making skill, pressure therapy, training of daily living task, group work and sensory integration therapy
5. Evaluation of clients' occupational performance
6. Recording and reporting on clients' occupational performance in case conferences, ward rounds, patients' record etc.
7. Students are given with the following to provide feedback for improvement
• Discussion time
• Opportunities for peer / group learning
• Continuous assessment / feedback to students
• Monitoring and evaluation of program</td></tr>
<tr><td>Teaching/Learning Methodology</td><td><u>Clinical Practice in Clinical Settings Supervised by Clinical Educator</u>
a. Clinical observations enable students to understand and clarify functional problems of clients with disability and the use of occupational therapy assessments and interventions in clinical practice
b. Hands-on practice provides students with structured opportunities to plan and implement occupational therapy assessments and interventions under the guidance of clinical educators
c. Tutorials enable students to clarify questions, discuss topics of clinical interest, and consolidate the integration of clinical knowledge and practice</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td>Intended subject learning outcomes to be assessed</td></tr>
<tr><td>A - K</td></tr>
<tr><td>Continuous assessments</td><td>100</td><td>As a whole</td></tr>
<tr><td>Total</td><td>100 %</td><td></td></tr>
</table>
<u>Continuous assessments</u>
Continuous assessments towards overall grade (100%) – are appropriate as students' professional competence in terms of attitude, knowledge and skills are continuously developed and evaluated throughout the period of clinical education.</td></tr>
</table>

Student Study Effort Expected	***Clinical contact:***	***(280 Hrs.)***
	▪ Clinical practice	280 Hrs.
	Other student study effort:	***(127 Hrs.)***
	▪ Pre-and post-clinical seminars	7 Hrs.
	▪ Self study	120 Hrs.
	Total student study effort	**407 Hrs.**
Reading List and References	Nil	

YEAR 2 SYLLABUS
SEMESTER 1

Subject Code	**RS5353**
Subject Title	**CLINICAL SCIENCES IN MEDICAL & NEUROLOGICAL CONDITIONS**
Credit Value	3
Level	5, Year 2 – Semester 1
Pre-requisites	RS5302 Clinical Neuroscience and Neurology
Objectives	To equip students with depth of medical and neuroscience knowledge appropriate for entry level OT, and prepare them to address related issues important to the practice of physical rehabilitation.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** a. understand related investigation methods and assessment methods for common medical and neurological l conditions b. analyse patients' signs and symptoms and deduce relevant dysfunction, and thus describe implications to rehabilitation c. analyse patients' needs and initially formulate health and rehabilitation goals d. describe the community-based approaches and prevention and promotion services for common medical and neurological conditions
Subject Synopsis/ Indicative Syllabus	1. Pathological process underlying disorders in medical and neurolgical systems Allergy, metabolic, physiological, autoimmmue process 2. Clinical methods of investigation and management of specific medical and neurological conditions e.g. Angiogram, oximetry, CT scan, MRI. 3. Role of multidisciplinary team members involved in the rehabilitation of individuals with specific medical or neurological conditions. • medical doctors, neurosurgeons and neurologist • physiotherapist • nurses • speech therapist • dietician • medical social workers • family and caretakers 4. Selected common medical conditions related to, for examples: • The cardiovascular system e.g. ischaemic heart disease, • The respiratory system e.g. chronic obstructive pulmonary disease, • Oncology • Low vision

5. Selected common neurological conditions, for examples:
   - Cerebrovascular accident (CVA)
   - Traumatic brain injury (TBI)
   - Dementia
   - Parkinson's disease (PD)
   - Peripheral neuropathies
   - Other chronic illnesses

6. Service models for community-based rehabilitation and community reintegration of long-term medical and neurological conditions

7. Prevention, promotion and chronic disease self management approaches

Teaching/Learning Methodology

Lecture

Lectures will be used to cover basic clinical knowledge on pathologies of common medical and neurological conditions, influences on human occupations and related treatment theories and approaches to enhance human performances. Use of web-based and multi-media will facilitate the linking between clinical sign and symptoms with functional problems.

Assessment Methods in Alignment with Intended Learning Outcomes

Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed			
		a	b	c	d
Mini-quizzes	20	√	√	√	√
Two Written Tests (40% each)	80	√	√	√	√
Total	**100 %**				

Written Tests

Written tests will be used to assess students' understanding of pathologies of common medical and neurological conditions and their reasoning about clinical features' influence on human functions.

Mini quizzes

Quizzes will be used to assess students' understanding of the clinical pictures and common treatment approaches.

Student Study Effort Expected

Class contact:	***(35 Hrs.)***
▪ Lecture	35 Hrs.
Other student study effort:	***(100 Hrs.)***
▪ Literature search	30 Hrs.
▪ Self study	70 Hrs.

	Total student study effort	**135 Hrs.**
Reading List and References	**Recommended readings:** Albert, R.K., Spiro, S.G. (1999). *Comprehensive respiratory medicine*. Philadelphia: Mosby. Albuquerque, N.M. (1995). *Closed head trauma in children & adult*s [videorecording] Clinician's View; Hong Kong: Artsberg Enterprise Ltd Barnes, M. P., & Radermacher, H. (2003). *Community rehabilitation in neurology*. Cambridge, UK; New York: Cambridge University Press. Battersby, M., Lawn, S., & Pols, R. (2010). Conceptualisation of self-management. In D. Kralik, B. Paterson & V. Coates (Eds.), *Translating chronic illness research into practice* (pp. 85-110). Hoboken, NJ: Wiley-Blackwell. Ginsberg, L (1999). *Lecture notes on neurology*. Oxford: Blackwell Science. Gorelick, P.B. and Alter, M. (2002). *The prevention of stroke*. Boca Raton, Fla.: Parthenon Pub. Group. Lawn, S., & Schoo, A. (2010). Supporting self-management of chronic health conditions: common approaches. *Patient Educ Couns, 80*(2), 205-211. Lorig, K. (2006). *Living a healthy life with chronic conditions: self-management of heart disease, arthritis, diabetes, asthma, bronchitis, emphysema & others* (3rd ed.). Boulder, CO: Bull Pub. Company. Macleod, J. (2002*). Davidson's Principles and Practice Of Medicine* (19th ed.). New York: Churchill Livingstone. Maj, M. and Sartoris, M. (2002). *Dementia.* Chichester: Wiley. Pendleton, H.M. (2018). *Pedretti's Occupational Therapy: Practice Skills for Physical Dysfunction (8th edn). Missouri: Mosby.* Robinson, R.G. (1998). *The clinical neuropsychiatry of stroke: cognitive, behavioural, and emotional disorders following vascular brain injury*. Cambridge: Cambridge University Press. Schell B.A.B. (2019) *Willard and Spackman's Occupational Therapy (13rd edn.).* Philadelphia: Wolters Kluwer Swash, M. and Mason, S. (2002). *Hutchisons Clinical Methods* (21st

	ed.). London: Bailliere Tindall. Thompson, K. M., Parasyn, C. L., & Fuller, B. (2010). Community-based rehabilitation: opportunities for occupational therapists in an evolving strategy. In M. Curtin, M. Molineux & J. Supyk-Mellson (Eds.), *Occupational therapy and physical dysfunction: enabling occupation* (sixth ed., pp. 313-325). Edinburgh: Churchill Livingstone/Elsevier.

Subject Code	**RS5359**
Subject Title	**OT for DEVELOPMENTAL DYSFUNCTION**
Credit Value	3
Level	5, Year 2 – Semester 1
Pre-requisite	RS5351 Clinical Sciences in Developmental Conditions
Objectives	To develop students' knowledge and skills to evaluate, plan and implement occupational therapy programs to the needs of children and adults with developmental disabilities.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** *Professional/academic knowledge and skills* a. understand common rehabilitation concepts for people with developmental dysfunction b. understand OT practice, OT process, OT assessment, and OT treatment to improve the functional independence in play, school, self-care and social interactions for people with developmental dysfunction c. apply assessment skills, treatment skills and clinical reasoning skills for occupational therapy for people with developmental dysfunction d. prepare and present case report in both written and verbal formats e. evaluate the practice performance and suggest ways for improvement
Subject Synopsis/ Indicative Syllabus	1. Assessment methods and techniques for the developmental dysfunction such as standardized test, developmental checklist, family interview, and observation 2. Principles and issues of treating people with developmental dysfunction 3. Occupational therapy assessment and treatment of specific developmental conditions such as prematurity, intellectual disabilities, neuromuscular disorders, pervasive developmental disorders and specific learning disorders 4. Management of specific occupation in people with developmental dysfunction such as self-care, social, play and school skills
Teaching/Learning Methodology	Lectures will cover the knowledge in the clinical conditions and management. In tutorial and practical sessions, students will discuss clinical reasoning and practice the assessment and treatment skills. In group work and fieldwork visits, students will observe cases assigned and learn the occupational therapy practice, and practice the assessment and treatment skills. There is also case presentation and report to enable students to apply their theory and knowledge learnt and integrate into clinical practice. Self-

<table>
<tr><td></td><td>reflection will be engaged especially on fieldwork and case presentation.
a. Lecture; Tutorial/Practical
b. Group work: Students' practice of assessment and treatment
c. Fieldwork visits: Visit the assigned case for assessment and treatment practice
d. Case presentation and case report
e. Self reflection</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="5">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td></tr>
<tr><td>Written examination</td><td>40</td><td>✓</td><td>✓</td><td>✓</td><td></td><td></td></tr>
<tr><td>Continuous assessment on assessment and treatment plans, reports and practical skills</td><td>40</td><td></td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Group presentation</td><td>20</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="5"></td></tr>
</table>
<u>Written examination</u>
Written test (40%) – aims to assess students understanding and application of occupational therapy management of people with developmental dysfunctions.

<u>Continuous assessment on assessment and treatment plans, reports and practical skills</u>
Continuous assessment (40%) – aims to evaluate students' clinical reasoning, selection of assessment and treatment choice and skills in managing patients with common developmental problems.

Written assignment – aims to evaluate students' observation skills and clinical reasoning and reporting skills in managing children's performance and behaviours.

<u>Group presentation</u>
Group presentation (20%) – aims to evaluate students' ability to formulate and report on an occupational therapy case management plan on selected client based on an observation session, and the self-reflect on their work.
</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td>(50 Hrs.)</td></tr>
<tr><td>▪ Lectures</td><td>24 Hrs.</td></tr>
<tr><td>▪ Tutorial/Practical/Seminar</td><td>20 Hrs.</td></tr>
</table>
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	▪ Fieldwork study	6 Hrs.
	Other student study effort:	***(83 Hrs.)***
	▪ Consultation and discussion	10 Hrs.
	▪ Self-study	73 Hrs.
	Total student study effort	**<u>133 Hrs.</u>**
Reading List and References	**<u>Required text:</u>** Case-Smith, J., & O'Brien, J.C. (2015). *Occupational Therapy for Children and Adolescents* (7th ed.). St. Louis: Mosby. **<u>Reading list:</u>** Buck, S. (2009). *More than 4 wheels. Applying clinical practice to seating, mobility and assistive technology (Ed).* ON: Therapy Now Inc. Brazelton, T.B. & Nugent, K (2011). *Neonatal behavioral assessment scale (4th ed.)* London: MacKeith Press. Boyt Schell, B.A., Gillen, G. & Scaffa, M.E. (2014). *Willard & Spackman's Occupational Therapy.* (12th ed.). Philadelphia: Wolters Kluwer Health/ Lippincott Williams & Wilkins. Boehme, Regi (1988). *Improving upper body control*. San Diego: Singular Publishing Co. Boehme, Regi (1990). *The hypotonic child. Treatment for postural control, endurance, strength and sensory organization.* Therapy Skills Builders. Bruni, M. (2006). *Fine Motor Skills in Children with Down Syndrome: A Guide for Parents and Professionals* (2nd ed.). Bethesda, Md.: Woodbine House. Frick, S., Frick, R., Oetter, P & Richter, E. *Out of the mouth of babes*. (1996). <u>Han, Y.M.Y</u>. & Chan, A.S. (2018). Neural basis of learning issues in children with autism: A bridge to remediation planning. In: K.J. Kennedy, & J.C.K. Lee (Eds). *Routledge International Handbook of Schools and Schooling in Asia* (pp.542-554). New York: Routledge. doi/10.4324/9781315694382-51 Heep Hong Society. (2002). *Child Development Guide*. Hong Kong: Heep Hong Society. Henderson, A. & Pehoski, C. (2005). *Hand function in the child. Foundations for remediation. (2nd ed.)* St. Louis: Mosby. Kramer, P. & Hinojosa, J. (Eds.), *Frames of reference for pediatric occupational therapy* (3rd ed.,). Philadelphia, PA: Walters Kluwer, Lippincott Williams & Wilkins.

Kuhaneck, H. M., Spitzer, S. L. & Miller, E. (2008). *Activity analysis, creativity, and playfulness in pediatric occupational therapy: Making play just right*. Burlington, MA: Jones & Bartlett Learning.

Lueck, A. H. & Dutton, G.N., editors (2015). *Vision & the Brain – Understanding Cerebral Visual Impairment in Children.* NY: AFB Press.

Miller, F. (2005). *Cerebral Palsy*. New York: Spinger.

Morris, S.E. & Marsha D.K. (2000). Pre-feeding skills: A comprehensive resource for mealtime development. (2nd ed.). Pro-Ed Inc.

Roley, S.S., Blanche, E.I. & Schaaf, R.S.C. (2001). *Understanding the nature of sensory integration with diverse populations*. AZ: Therapy Skill Builders.

Oetter, P., Richter, E.W., & Frick, S.M. (1999). *M.O.R.E.: Integrating the mouth with sensory and postural functions. (2nd ed.)*. Hugo, MN, PDP Press, Inc.

Poon, M.Y., Wong, S.K. & Ng R.S. *(2006). Occupational therapy treatment for children with specific learning difficulties.* Hong Kong. HKOTA.

Whittaker, S., Scheiman, M., & Sokol-McKay, D. A. (2016). *Low vision rehabilitation: a practical guide for occupational therapists (2nd ed.).* Thorofare, NJ: SLACK Incorporated.

Wolf, L.S., & Glass, R.P. (1992). *Feeding and swallowing disorders in infancy: Assessment and management.* AZ: Therapy Skill Builders.

葉張蓓蓓 (2003)，《孩子不笨——感覺統合訓練手冊》香港: 突破出版社。

葉張蓓蓓 (2005)，《孩子確不笨——「百分百」感統訓練活動》香港:突破出版社。

韓明怡 鄧羽崔 鄒玉屏合編 (2008): （*CVI* 訓練同工手冊）香港: 心光視障幼兒教育支援服務。

韓明怡 鄧羽崔 鄒玉屏 (2008). 大腦性視障幼兒之早期介入與訓練。方天大 楊靜儀合編（*CVI* 大腦性視障教學手冊）香港: 心光機構。

Subject Code	**RS5361**
Subject Title	**OT FOR PHYSICAL DYSFUNCTION II (MEDICAL & NEURO-REHABILITATION)**
Credit Value	3
Level	5, Year 2-Semester 1
Pre-requisite	Nil
Co-requisite	Clinical Sciences in Medical & Neurological Conditions (RS5353)
Objectives	To facilitate students' understanding the roles and function of occupational therapy in rehabilitation of medical and neurological cases/clients commonly referred, throughout early adolescence, adulthood and old age. In addition, to apply theories and approaches for occupational therapy practice, principles of assessment, treatment planning, re-evaluation and continuity of care relevant to medical and neurological rehabilitation.
Intended Learning Outcomes	a. Further understand and apply OT process to enable occupation b. Extend from acute, subacute to more long term management c. Appreciate the adoption of holistic approaches in assessment, intervention and community reintegration plan and actions d. Conduct ongoing, valid evaluation and modify treatment plan accordingly
Subject Synopsis/ Indicative Syllabus	<u>Commonly referred medical and neurological cases for occupational therapy in Hong Kong</u> - As taught in Clinical Sciences II (Medical and Neurological Conditions) such as cardiopulmonary diseases, cerebral vascular accident (CVA), traumatic brain injury (TBI), Parkinson's diseases, and terminal ill <u>Common theories and approaches for occupational therapy intervention of medical and neurological conditions</u> - Occupational Performance model - Motor theories e.g. Neurodevelopmental (NDT) approach, Motor learning theory - Cognitive-Behavioural - Rehabilitative and Compensatory approaches (taught in RS341) <u>Case management</u> - Clinical reasoning and integration of both clinical knowledge and existing clinical scenario. <u>Assessment/evaluation-related</u> - Areas to be evaluated during recovery/ treatment stages (e.g. state of consciousness, reflexes, sensory awareness and level of motor responses, response to verbal commands)

	- Common assessment methods and tools e.g. cognitive assessments such as neurobehavioural cognitive screening examination (NCSE), Loewestein Occupational Therapy Cognitive Assessment (LOTCA) - Need for other ancillary/community services - Home safety and accessibility - Return to work potential - Precautions and preventive measures <u>Treatment process</u> Treatment considerations e.g. - review goals with client and family - sequencing of the treatment techniques, determine the priority of these techniques - recommended treatment approaches and techniques, e.g.: -increase level of response to sensory and environmental stimuli by providing structured sensory stimulation activities; -improve posture and positioning of client with abnormal tone e.g. side-lying in bed, (NDT Approach); -increase functional independent in daily living tasks by training basic self-care (bathing, dressing, feeding and hygiene), with justified use of Rehabilitative Approach; -improve perceptual abilities to increase independence in daily living tasks by various adaptive and remedial approaches; -improve cognitive function by various cognitive remediation /training and rehabilitation approaches; -improve chronic condition self management capacity by education and support - treatment duration and frequency in relation to sensory-perceptual, motor, cognitive and emotional status of client; <u>Evaluation process</u> - decide and develop rationale /methods to evaluate treatment efficacy and efficiency - preparation for discharge - follow-up care
Teaching/Learning Methodology	a. Lecture b. Tutorial c. Practical Lectures will cover the theory and principles of management of medical and neurological conditions, illustrate with case studies and samples of treatment plan/regime. During tutorials sessions, students will discuss clinical reasoning, appraise evidence-based practice, and outcome measures related to the clinical conditions. In practical classes, students will learn holistic assessment (physical, cognitive, behavioral and social) and treatment skills (ADL, IADL and functional training) and the

<table>
<tr><td></td><td>rationale of selecting these skills. Practical sessions including guided- and self-practice, and clinical visit will improve students' skill proficiency in assessment (selection, administration and interpretation) and treatment (prepare clients, environment and goal-direction activities).

Web-based learning allows student to learn the knowledge and enhance their clinical problem ability at their own time.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="4">Intended subject learning outcomes to be assessed (Please tick as appropriate)</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td></tr>
<tr><td>Written test (x2)</td><td>40</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Practical test</td><td>20</td><td></td><td></td><td>√</td><td>√</td></tr>
<tr><td>Final examination</td><td>40</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="4"></td></tr>
</table>
Written test aims to assess students understanding of theory, pathology, and OT's management of people with medical and neurological conditions.
Practical test aims to evaluate students clinical reasoning, selection of evaluation and treatment choice and skills in managing simulated patients with common medical and neurological conditions.
Final examination aims to evaluate students' clinical reasoning and problem-solving through treatment implementation, case management, design of treatment programmes, evaluation assessment and treatment approaches and provision of evidence based discussion on medical and neurological conditions.</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td>50 Hrs.</td></tr>
<tr><td>▪ Lecture</td><td>20 Hrs.</td></tr>
<tr><td>▪ Tutorial</td><td>16 Hrs.</td></tr>
<tr><td>▪ Practical</td><td>14 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>80 Hrs.</td></tr>
<tr><td>▪ Literature search</td><td>10 Hrs.</td></tr>
<tr><td>▪ Self study</td><td>40 Hrs.</td></tr>
<tr><td>▪ Self and group practice</td><td>30 Hrs.</td></tr>
<tr><td>Total student study effort</td><td>130 Hrs.</td></tr>
</table>
</td></tr>
<tr><td>Reading List and References</td><td>Adamovich, B., Henderson, J., & Auerbach, S. (1985). Cognitive Rehabilitation of Closed Head Injured Patients: A Dynamic Approach. San Diego: College Hill Press.

Grieve, J.I. (1993). Neuropsychology for Occupational Therapists: Assessment of Perception and Cognition. Oxford: Blackwell</td></tr>
</table>

Scientific Publications.

Gross, Y. & Schutz, L.E. (1986). Intervention models in neuropsychology, In B.D. Uzzell & Y. Gross (Eds*.), Clinical Neuropsychology of Intervention. (*pp.179-204). Boston: Martinus Nijhoff.

Harding, L. and Beech, J.R. (1996). *Assessment in Neuropsychology*. London: Routledge.

Haken, H. (1996). *Principles of Brain Functioning: A Synergetic Approach to Brain Activity, Behavior and Cognition*. Berlin: Springer-Verlag.

Holden, U. (1988). *Neuropsychology and Ageing: Definitions, Explanations, and Practical Approaches*. London: Croom Helm.

Okkema, K. (1993). *Cognition and Perception in Stroke Patient: A Guide to Functional Outcomes in Occupational Therapy*. Gaithersburg, Md.: Aspen Publishers.

Pendleton, H.M. (2018). *Pedretti's Occupational Therapy: Practice Skills for Physical Dysfunction (8th edn)*. Missouri: Mosby.

Pressley, M. (1995). *Cognition, Teaching, and Assessment*. New York: Harper Collins College Publishers.

Prigatano, G. (1986). *Neuropsychological Rehabilitation after Brain Injury.* Baltimore: Johns Hopkins University Press.

Radmomski, M.V. (2014). *Occupational Therapy for Physical Dysfunction.* Philadelphia: Lippincott Williams & Wilkins (7th edn)

Reed, S.K. (1996). *Cognition: Theory and Applications.* Pacific Grove: Books/Cole Publishing Co.

Sohlberg, M.M. & Mateer, C.A. (1989). *Introduction to Cognitive Rehabilitation: Theory and practice.* New York: Guilford.

Subject Code	**RS5366**
Subject Title	**ENVIRONMENTAL ISSUES IN OT PRACTICE**
Credit Value	3
Level	5, Year 2 – Semester 1
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	On satisfactory completion of this subject, students should be able to: 1. understand the influence of physical and social environments to people with disabilities and their interactions with human behaviour. 2. explain the implications of accessibility, design principles, and technology for the rehabilitation of people with disabilities. 3. integrate, develop, and apply assistive technology to the needs of clients with disabilities. 4. identify current development of assistive technology for clients with disabilities. 5. analyze and evaluate the effectiveness of modifying environments applying technology to improve the occupational therapy outcome of selected cases through case development and project work.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a. Understand the relationship between environments and disabilities b. Conduct assessments for barrier-free and risky environments, and perform environmental inspection c. Relate environmental intervention as a kind of therapeutic tool in occupational therapy d. Write home visit report and draw floor plan and drawings related to home modification e. Evaluate wheelchair and seating f. Design and develop an assistive device for persons with disability with reference to environmental issues, universal design and assistive technology principle by making use of their innovations and creative ideas, and demonstrate how OT can adapt this device to improve a person's functional performance and participation
Subject Synopsis/ Indicative Syllabus	**1. Environmental issues for people with disabilities** ▪ Theories of human-environment interaction ▪ Environmental safety and common environmental hazards for humans ▪ Safety environments for people with disabilities ▪ Architectural design, anthropometrics and barrier-free environments

	▪ Home visit, environmental assessment and home modification ▪ Architectural drawing and report writing ▪ Case development in applying environmental issues in Occupational Therapy process **2. Adaptive devices for people with disabilities** ▪ Assistive technology ▪ Basic principles of ergonomics and universal design ▪ Design principles for adaptive devices, fabrication and their uses ▪ Basic principles of 3D printing ▪ Assistive mobility, wheelchair prescription and adaptation, wheelchair transport ▪ Seating issues and assessment, and seating devices/ adaptations ▪ Driving issues for the disabled **3. IT applications in OT and updated issues** ▪ Adapted switches, environmental control units, computer adaptations and accessories for people with disability ▪ Augmentative and alternative communication ▪ Computer training software applications and virtual reality
Teaching/Learning Methodology	a. Lectures will cover the theory and principles of interactions between environment and people with disabilities, universal design and barrier-free environment, environmental modification, and assistive technology. b. During laboratory sessions, students will role-play clients with disabilities to explore different environments, conduct environmental inspection and draw floor plan; learn the use of wheelchairs, seating adaptations, argumentative and communicative devices, as well as environmental control units, and recent development of hardware and software in information technology for people with disabilities. c. Field visits include visits to housing centre, seating centre and self-help groups for people with physical disabilities. d. E-learning will be used in online quiz and e-assignment. Web-based learning allows student to learn the knowledge and enhance their clinical problem ability at their own time. e. During the project, students are expected to complete an assistive device in small groups and present it in the form of a demo showcase.

Assessment Methods in Alignment with Intended Learning Outcomes

Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)					
		a	b	c	d	e	f
1. Mini quizzes	30	√	√				
2. Written assignment	30	√	√	√	√		
3. Practical test	10			√		√	
4. Group presentation and competition (Design with finish product)	30			√			√
Total	**100**						

Quizzes evaluate students' understanding in barrier-free environments, environments, assistive technology and assistive devices for people with disabilities.

Written assignment evaluates students' ability in conducting a virtual environmental modification (write home visit report and action plan with professional diagram) in an e-learning programme.

Practical test will be in line with the fieldwork practice that students are expected to be able to evaluate wheelchair and seating for people with disabilities.

The group presentation enables students to consider the needs of people with disabilities and design principles which improves students' thinking skills and creativity.

Student Study Effort Expected

Class contact:	***56 Hrs.***
▪ Lecture	28 Hrs.
▪ Tutorials/ Laboratory practice	24 Hrs.
▪ Field visit	4 Hrs
Other student study effort:	***30 Hrs.***
▪ Literature Review	6 Hrs.
▪ Group project	24 Hrs.
Total student study effort	**86 Hrs.**

Reading List and References

Architectural Services Department (2008). *Universal accessibility for external areas, open spaces and green spaces*. Architectural Services Department, Hong Kong. Downloaded at http://www.archsd.gov.hk/english/knowledge_sharing/ua/index.html

Bryant, D. P. (2003). *Assistive Technology for People with Disabilities*. Boston, MA: Allyn and Bacon.

Buildings Department (2008). *Barrier free access: Final draft design manual*. Buildings Department, Hong Kong. Downloaded at http://www.bd.gov.hk/english/documents/code/e_bfa2008.htm

de Jonge, D., Scherer, M. J., Rodger, S. (2007). *Assistive technology in the workplace*. St. Louis: Mosby, Inc.

Federici, S, & Scherer, M. J. (2012). *Assistive technology assessment handbook*. FL: CRC Press, Taylor & Francis Group.

Gillen, G. & Burkhardt, A. (2004). *Stroke rehabilitation: A functional approach* (2nd Ed). St. Louis: Mosby.

Hong Kong Housing Society. (2005). *Universal design guidebook for residential development in Hong Kong.* Hong Kong: Hong Kong Housing Society.

Letts, L., Rigby, P., & Stewart, D. (2003). *Using environments to enable occupational performance*. NJ: SLACK Incorporated.

Pendleton, H. M., & Schultz-Krohn, W. (2013). *Pedretti's Occupational Therapy – Practice skills for physical dysfunction* (7th ed.). St. Louis: Elsevier.

Radomski, M. V., & Trombly Latham, C. A. (2014). *Occupational Therapy for Physical Dysfunction* (7th ed.). Baltimore: Lippincott Williams & Wilkins.

Schell, B. A. B., Gillen, G., & Scaffa, M. E. (2014). *Willard & Spackman's Occupational Therapy* (12th ed.). Philadelphia: Lippincott Williams & Wilkins.

Working Group for Community Occupational Therapy (1999). *Guide to Environmental Modification*. Hong Kong: Hong Kong Occupational Therapy Association.

YEAR 2 SYLLABUS
SEMESTER 2

Subject Code	**RS5323**
Subject Title	**ADMINISTRATION AND MANAGEMENT**
Credit Value	3
Level	5, Year 2-Semester 2
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	Students learn to be aware of the current healthcare system in Hong Kong and around the world. They need to be aware of the concepts of entrepreneurship and management so as to cope with their future roles as a manager and clinician in a variety of practice settings.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a. Identify and understand the impact of sociological, political, economic, and epidemiological factors on the delivery of physiotherapy / occupational therapy in Hong Kong. b. demonstrate an awareness of local and international public health trends that may influence the context of physiotherapy/occupational therapy practices. c. draw upon the concepts of entrepreneurship and management in designing a business plan of a physiotherapy / occupational therapy practice. d. formulate marketing strategies to enhance service (business) opportunities. e. understand and apply the concepts of quality assurance and staff performance criteria to develop effective plans for achieving quality practice/service. f. identify means of promoting and upgrading the service and status of therapy professions. g. relate and discuss the implications of professional ethics and the law on physiotherapy / occupational therapy practices.
Subject Synopsis/ Indicative Syllabus	1. Overview of the current and future Health Care System in Hong Kong and overseas. 2. Introduction to Health Care Management – basic concepts and skills of management and administration. 3. Therapist as a Manager and as a Clinician i. Operational management a. Organizational structure b. Planning on space and equipment

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<tr><td></td><td>
c. Basic concepts of financial management
ii. Strategic and Business planning and administration
a. Concepts of entrepreneurship
b. Marketing & health promotion strategies
c. Concepts of quality assurance and risk management
iii. Human Resource Management
a. Leadership & communication
b. Inter-professional collaboration and team work
c. Change management
d. Staff appraisal, training and development
4. Health Service Legislation and professional development
i. Supplementary Medical Professions Ordinance
ii. Professional Registration Board
iii. Professional associations
iv. Professional and ethical standards
5. Introduction to different healthcare service delivery models
i. Public sector
ii. Private sector
iii. Community-based rehabilitation services
iv. Concepts on medical insurance models
</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>Interactive lectures highlight the concepts of business administration, management and entrepreneurship and in the health care and rehabilitation service. Organizational structure and management models of different healthcare organizations in the public and private sectors will be examined and compared. Experienced managers and therapists will share their managerial and administrative experiences with students in seminar sessions. Students in small groups will work independently, applying administrative and management concepts to formulate business plans for simulated-practice models. Through learning activities such as student-presentations, students learn to appreciate how the organizational structures impact on their daily professional practices and how marketing strategies helps to promote professional services.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes
(Note 4)</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="7">Intended subject learning outcomes to be assessed (Please tick as appropriate)</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td><td>g</td></tr>
<tr><td>Business plan</td><td>40</td><td></td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
</table>
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</table>

(group project)									
Individual report	40	√	√	√	√	√	√	√
Class work	20	√	√				√	√
Total	100%							

Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:

1. Business plan: This group project will allow the students an opportunity to develop their own ideas and apply the concepts that they have learnt in this subject into this business plan. There will be a group presentation and a written report to be submitted.
2. Individual report: Students will be asked to select a topic out of several topics which are current healthcare issues that are relevant for their learning, and they need to find the appropriate literature to support their viewpoints and write a complete essay on the issue.
3. During tutorial sessions, there will be opportunities for students to participate in group discussions, debates and submit short written reports on various topics and this will be evaluated.

Student Study Effort Expected		
	Class contact:	***39 Hrs.***
	▪ Lectures	16 Hrs.
	▪ Tutorials	12 Hrs.
	▪ Seminars	6 Hrs.
	▪ Field visit	5 Hrs.
	Other student study effort:	***66 Hrs.***
	▪ Group discussion/ work on business plan	34 Hrs.
	▪ Self-reading/literature search/ written assignment	32 Hrs.
	Total student study effort	**<u>105 Hrs.</u>**

Reading List and References	Egan, G. (2007). *The skilled helper: a problem-management and opportunity-development approach to helping*. (8th ed.) Pacific Grove, USA: Thomson/Brooks/Cole. Everett, T. Donaghy M. & Feaver S. (2003). *Interventions for mental health. - an evidence-based approach for physiotherapists and occupational therapists.* Butterworth

	Heinemann. French, S. & Sim, J. (Eds.) (2004). *Physiotherapy: a psychosocial approach.* Edinburgh. Butterworth Heinemann

Subject Code	**RS5363**
Subject Title	**OT MANAGEMENT IN GERIATRIC PRACTICE**
Credit Value	3
Level	5, Year 2-Semester 2
Pre-requisite	RS5361 OT for Physical Dysfunction II (Medical and Neurological Conditions)
Objectives	To develop students with the professional knowledge and skills essential for occupational therapists in ageing and geriatric practice.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: a) describe global and local trends of ageing population and analyze its implications on OT practice b) understand and apply ageing theories to the analysis of functioning and dysfunction of older people c) discuss OT geriatric practice across various care levels – acute and sub-acute, home/community-based, long-term care, and primary care d) select suitable clinical measures and evaluation tools and interpret findings for treatment planning e) discuss OT management in selected geriatric conditions
Subject Synopsis/ Indicative Syllabus	• Global and local trends of aging population and its implications on healthcare and rehabilitation • Aging theories and age-related changes in different bodily systems. • Roles and functions of occupational therapists in primary care, secondary care, home and community practice, and long-term care Assessment and management of specific areas of practice • Mental health • Dementia and other cognitive impairments • Home safety and falls prevention • Frailty • Prevention and chronic disease self-management
Teaching/Learning Methodology	Lectures are used to introduce and equip students with the up-to-date knowledge and principles of occupational therapy management for the geriatric population. Intensive sessions including field visits, classroom discussions and in-depth case studies are used to reinforce students' critical thinking and clinical reasoning skills, and to practice related clinical skills for the management of geriatric clients. Self-directed learning is supported using online learning. A

<table>
<tr><td></td><td>collection of common geriatric assessments is provided on the Occupational Therapy Assessment Community of the PolyU Blackboard. Students learn the administration procedures and interpretation of the assessment scores online. Demonstration videos are provided to facilitate self-directed learning.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><th rowspan="2">Specific assessment methods/tasks</th><th rowspan="2">% weighting</th><th colspan="5">Intended subject learning outcomes to be assessed (Please tick as appropriate)</th></tr>
<tr><th>a</th><th>b</th><th>c</th><th>d</th><th>e</th></tr>
<tr><td>Continuous assessment</td><td>60</td><td></td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Examination</td><td>40</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="5"></td></tr>
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Continuous assessments, that may include practical test, visit report and cased-based presentations, are used to develop students' critical understanding of the OT geriatric practice and clinical reasoning skills required for the OT management of specific geriatric conditions.

Examination is designed to evaluate students' knowledge on concepts related to the aging process and the aging population and ability of critical analysis of knowledge in the management of geriatric clients with multiple pathologies.</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Class contact:</td><td>42 Hrs.</td></tr>
<tr><td>▪ Lecture</td><td>14 Hrs.</td></tr>
<tr><td>▪ Tutorial/Seminar</td><td>20 Hrs.</td></tr>
<tr><td>▪ Field visit</td><td>8 Hrs</td></tr>
<tr><td>Other student study effort:</td><td>60 Hrs.</td></tr>
<tr><td>▪ Independent Study</td><td>30 Hrs.</td></tr>
<tr><td>▪ E-learning and other study activities</td><td>30 Hrs.</td></tr>
<tr><td>Total student study effort</td><td>102 Hrs.</td></tr>
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</td></tr>
</table>

Reading List and References	• Atwal, A., McIntyre, A., & ebrary Inc. (2013). Occupational therapy and older people • Bonder, B. R. (2014). Providing occupational therapy for older adults with changing needs. In H. S. Willard & B. A. B. Schell (Eds.), Willard & Spackman's occupational therapy (12th ed., pp. 953-961). Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins. • Bonder, B.R. & Dal Bello-Haas, V. (2009). Functional performance in older adults (3rd ed.). Philadelphia: F.A. Davis Company. • Calderia, K. M., & Reitz, S. M. (2010). Preventing Falls Among Community-Dwelling Older Adults In M. E. Scaffa, S. M. Reitz & M. Pizzi (Eds.), Occupational therapy in the promotion of health and wellness (pp. 470-482). Philadelphia: F.A. Davis Co. • Glover, J. S., & Wright, J. (2013). Special needs of the older adult. In L. W. Pedretti, H. M. Pendleton & W. Schultz-Krohn (Eds.), Pedretti's occupational therapy: practice skills for physical dysfunction (7th ed., pp. 1228-1245). St. Louis, Mo.: Elsevier. • Hodges, L., Bridge, C., & Chaudhary, K. (2007). Dementia day respite centre capital works program guidelines. Sydney: Australia: Faculties of Health Sciences and Architecture, The University of Sydney. • Lewis, S. C. (2003). Seating, positioning and wheeled mobility intervention Elder care in occupational therapy (2nd ed., pp. 269-281). Thorofare, NJ: SLACK Incorporated. • Mackenzie, L. (2011). Occupation analysis and falls prevention. In L. Mackenzie & G. O'Toole (Eds.), Occupation analysis in practice (pp. 177-194). Chichester: Blackwell Pub. • McIntyre, A. (2011). Occupation analysis and successful ageing. In L. Mackenzie & G. O'Toole (Eds.), Occupation analysis in practice (pp. 280-296). Chichester: Blackwell Pub. • Pizzi, M. A., & Smith, T. M. (2010). Promoting successful aging through occupation. In M. E. Scaffa, S. M. Reitz & M. Pizzi (Eds.), Occupational therapy in the promotion of health and wellness (pp. 454-469). Philadelphia: F.A. Davis Co. • Sirven, J. I., & Malamut, B. L. (2008). Clinical neurology of the older adult. Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins.

Subject Code	**RS5364**
Subject Title	**OCCUPATIONAL THERAPY AND VOCATIONAL REHABILITATION**
Credit Value	3
Level	5, Year 2 – Semester 2
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	By completing this subject, students will be able to demonstrate an understanding of the return-to-work process of clients suffering from different kinds of physical and psychiatric conditions, work-related injuries, and developmental disabilities as well as to apply knowledge in work/vocational rehabilitation to design training programmes for improving return-to-work outcomes of them.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** <u>*Professional/academic knowledge and skills*</u> a. differentiate the difference between occupational rehabilitation, work rehabilitation, vocational rehabilitation and industrial rehabilitation b. criticize the use of different assessment packages for identifying the work-related needs of clients c. formulate work training strategies for improving work-related outcomes of physical, psychiatric and work-injury clients d. design specific work training and placement programme for clients e. appraise different principle, models and process of vocational rehabilitation f. evaluate practice of work rehabilitation in terms of its evidence base g. understand the concept of work disability management and different return-to-work interventions h. understand the role of occupational therapist in occupational safety and health
Subject Synopsis/ Indicative Syllabus	1. Work physiology and job analysis 2. Functional/work capacity evaluation and report (medical legal issues) 3. Sincerity of effort 4. Work rehabilitation for people with work-related musculoskeletal injuries and disorders 5. Return-to-work process and workplace disability management 6. Ergonomics for therapist and concept of risk management in occupational safety and health 7. Job training and placement facilities (work resettlement) in Hong Kong

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8. Vocational assessment and rehabilitation for people with mental problem and developmental disabilities
9. Conventional approaches to vocational rehabilitation in psychiatric field
• barriers and predictors of employment
• the “train-place” approach: skills training and sheltered placement
• the “place-train” approach: Supported employment and the Individual Placement and Support Approach (IPS)
10. Psychosocial and work adjustment counseling
11. Evidence-based practice in work/vocational rehabilitation
</td></tr>
<tr><td>Teaching/Learning Methodology</td><td>Lectures are to cover the holistic management of resultant occupational dysfunction of clients suffering from different kinds of physical and psychiatric conditions, work-related injuries, and developmental disabilities. Tutorials and case studies would be adopted for discussion on case management of clients suffering from these conditions. Practical sessions are for demonstration of practical skills in assessment, treatment & documentation of outcomes. Seminar presentation is used to enhance students’ ability in integrating theories, treatment approaches & techniques in case management. Self-learning packages will be provided for students’ self-directed learning, students are also encouraged to refer to self-learning booklets and relevant web site for learning.</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td colspan="8">Intended subject learning outcomes to be assessed</td></tr>
<tr><td>a</td><td>b</td><td>c</td><td>d</td><td>e</td><td>f</td><td>g</td><td>h</td></tr>
<tr><td>Group Coursework</td><td>40</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td></tr>
<tr><td>Individual Coursework</td><td>20</td><td></td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Examination</td><td>40</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td><td>✓</td></tr>
<tr><td>Total</td><td>100 %</td><td colspan="8"></td></tr>
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<u>Coursework</u>
Group presentation and report (group work) (40%) – achieve intended learning a-g, through job analysis of different occupational injuries and development of a functional capacity evaluation protocol to identify the problems which probably are encountered by the patient during the return-to-work process.

Written individual assignment on return-to-work interventions (20%) – achieve intended learning #b-h.

<u>Examination</u>
A two-hour written test (40%) – achieve intended learning a-h,
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	through essay type questions to assess students' understanding and knowledge in work/vocational rehabilitation so as to design interventions for improving return-to-work outcomes of clients with different kinds of physical and psychiatric conditions, work-related injuries, and developmental disabilities.	
Student Study Effort Expected	***Class contact:***	***(42 Hrs.)***
	▪ Lecture	14 Hrs.
	▪ Tutorial/Seminar	22 Hrs.
	▪ Fieldwork study	6 Hrs.
	Other student study effort:	***(72 Hrs.)***
	▪ Self-study	44 Hrs.
	▪ Preparation of assignments	28 Hrs.
	Total student study effort	**<u>114 Hrs.</u>**
Reading List and References	Becker, D. R., & Drake, R. E. (1993). *A Working Life: The Individual Placement and Support (IPS) Program*. New Hampshire: Dartmouth Psychiatric Research Center. Bond. G. (1992). Vocational Rehabilitation. In R. P. Liberman (Ed.), *Handbook of Psychiatric Rehabilitation* (pp.244-275). Boston: Allyn & Bacon. Cheng, A.S.K. (1993). Strength and endurance training in work hardening program. *Hong Kong Journal of Occupational Therapy, 7*, 26 - 36. Cheng, A.S.K., & Cheng, S.W.C. (2010). The predictive validity of job-specific functional capacity evaluation on employment status of patient with non-specific low back pain. *Journal of Occupational and Environmental Medicine*, 52 (7), 719-724. Chong, C. S., & Cheng, A.S.K. (2010). Work injury management model and implication in Hong Kong: A literature review. *Work, Jan 1: 35(2), 221-229.* Jacobs, K. (Ed.). (2007). *Ergonomics for therapists* (3rd ed.). Boston, MA: Mosby Elsevier. Li, E. P.Y. (2004). Self-perceived equal opportunities for people with Intellectual Disability. *International Journal of Rehabilitation Research*, 27 (3), 241-245. Matheson, L. (1982). *Work Capacity Evaluation*. Anaheim. CA: Employment and Rehabilitation Institute of California. Rubin, S. E., & Roessler, R. T. (2001). *Foundations of the*	

	Vocational Rehabilitation Process (4th ed). Austin, Texas: Pro-ed. Tsang, H. W. H., Kopelowizc, A., Liberman, R. P. (2001). Social skills training for finding and keeping a job with the mentally ill. *Psychiatric Services*, 52 (7), 891 – 894. Wehman, P. (2006) *Life Beyond the Classroom: Transition Strategies for Young People with Disabilities* (4th ed.). Baltimore, MD: Paul H. Brookes Publication Co.

YEAR 2 SYLLABUS
SEMESTER 3

Subject Code	**RS5324**
Subject Title	**RESEARCH PROJECT**
Credit Value	3
Level	5, Year 1-Semester 3 to Year 2-Semester 3
Pre-requisite	RS5303 Research Methods and Statistics
Objectives	By completing this subject, the students will be able to demonstrate an initiative, independence, and the ability to solve problems during the pursuit of a defined project.
Intended Learning Outcomes	Upon completion of the subject, students will be able to: ***Professional/academic knowledge and skills*** a. Demonstrate initiative, independence and the ability to solve problems during the pursuit of a defined project. b. Based on information from the scientific literature, justify, design and interpret project work. c. Integrate understanding of the interrelationships between project rationale, project design/methodology and final project outcomes. d. Integrate depth of understanding of the subject content and methodology within their specific project e. Present the results of the project in an appropriate written and oral scientific manner. ***Attributes for all roundedness*** f. Read and summarize information from the professional literature. g. Use English to articulate, analyze and evaluate information and ideas verbally.
Subject Synopsis/ Indicative Syllabus	The content and organization of the project study will depend on the specific project and its objectives. Each student will be expected to spend approximately 135 hours for the project. It is anticipated that each student will monitor their time in at least three areas: independent study, discussion time with supervisor(s), and group-related activities. Organizational meetings will be held to assist students to understand subject expectations and to prepare for final project presentations.
Teaching/Learning Methodology	Independent study is the primary mode of learning. It is focused on a specific project with identified objectives. Students will form small groups and undertake an independent project under the guidance of a project supervisor. The guidance may take the form of regular meetings, laboratory sessions, tutorials and/or consultations during field visits. Together with the Research Methods and Statistics course (RS5303), a range of learning experiences are provided to allow the student to

develop beginning-level skill in the process of scientific inquiry. The aim is to *develop 'critical consumers of the professional/scientific literature and to have the ability to collaborate in investigative projects'*. The development of an investigative project allows students to practice skills required in the scientific inquiry process. The final written report on the project is assessed in *Research Project (RS5324).*

The project will represent a component of an on-going project or a new venture (e.g. pilot project). The project consists of three components: i) critical review of the literature review; ii) formulation of research questions and study design; and iii) data collection and analysis. Whichever type, a range of projects may meet the global objectives for the MPT Project. Projects may reflect different areas and approaches, such as:

- experiment-based (e.g., measures of change, reliability);
- service-based (e.g., 'needs' assessment, develop/evaluate exercise or intervention programmes);
- survey-based (e.g., quality of life measures, profile of continuing education);
- observation-based (e.g., interactions between clients and rehabilitation professionals, rehabilitation team interactions);
- interview-based (e.g., client's perception of service/intervention, impact of disability on client's daily living), or
- aids and technology development (e.g., develop/adapt an assistive device/aid).

To further assess the students' planning process and critical thinking, each student is required to submit a portfolio describing the significance of the project, the process of planning the various aspects of the study (e.g., research question, study design, outcome measurements, statistical analysis), and the difficulties encountered.

Assessment Methods in Alignment with Intended Learning Outcomes

Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)						
		a	b	c	d	e	f	g
Individual assessment with viva examination	30	✓	✓	✓	✓	✓	✓	✓
Portfolio	10	✓	✓	✓	✓	✓	✓	✓
Final written report	40	✓	✓	✓	✓	✓	✓	✓
Oral presentation	20	✓	✓	✓	✓	✓	✓	✓
Total	100 %							

	Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes: <u>Continuous assessment</u> Individual Assessment (30%) – achieve intended learning outcomes #a-g through continuous assessment with regard to active participation and critical questioning of each student. Portfolio (10%) – achieve intended learning outcomes #a-g through the submission of a portfolio. Written Report (40%) – achieve intended learning outcomes #a-g through completion of written report in the form of a submission for publication to the local PT or OT journal. Presentation (20%)- Achieve intended learning outcomes #a-g through the scientific oral presentation.	
Student Study Effort Expected	**Class contact:**	***14 Hrs.***
	▪ Tutorial/Seminar	14 Hrs.
	Other student study effort:	***120 Hrs.***
	▪ Independent study + discussion time with supervisor(s) + group-related activities	120 Hrs.
	Total student study effort	**<u>134 Hrs.</u>**
Reading List and References	Cooper, H.M. (1989). Integrating research: a guide for literature reviews. 2nd Edition. Newbury Park: Sage Publications. Day, R.A. (2006). How to Write and Publish a Scientific Paper. 6th Edition. Phoenix, Az: Oryx Press. Domholdt, D. (2005). Rehabilitation research: principles and applications. 3rd Edition. St. Louis, Mo.: Elsevier Saunders. Hicks, C.M. (1995). Research for Physiotherapists: Project Design and Analysis. 2nd Edition. Edinburgh: Churchill Livingstone. Ottenbacher, K.J. (1986). Evaluating Clinical Change: Strategies for Occupational and Physical Therapists. Baltimore: Williams & Wilkins. Portney, L.G. & Watkins, M.P. (2009). Foundations of Clinical Research: Applications to Practice. 3rd Edition. Upper Saddle River, New Jersey: Prentice-Hall Inc	

Subject Code	**RS5373**
Subject Title	**CLINICAL EDUCATION III**
Credit Value	7
Level	5, Year 2 – Semester 6
Pre-requisite	RS5372 Clinical Education II
Objectives	This subject provides students with the opportunity to integrate and consolidate knowledge, skills and attitudes learned in school to occupational therapy practice in a common or a particular clinical specialty. It provides students with the opportunity to practice basic clinical management functions for independent occupational therapy practice and day-to-day operation of an occupational therapy department. The subject also prepares students to evaluate the application of occupational therapy models of practice to common clinical specialties of occupational therapy practice.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** <u>*Professional/academic knowledge and skills*</u> a. gather relevant information to facilitate the selection, conduction and evaluation of assessment b. select, plan, conduct, and evaluate appropriate treatment modalities/programmes for specific clients both in a clinical setting and in an appropriate rehabilitation environment c. evaluate the effectiveness of treatment d. conduct preliminary evaluation on different treatment approaches to prepare for further in-depth evaluation and studies in the Hong Kong Polytechnic University e. present verbal and written occupational therapy reports as an effective means of professional communication f. account professionally in accordance with the Code of Ethics of Supplementary Medical Profession Ordinance <u>*Attributes for all-roundedness*</u> g. search for and review relevant reference materials to enhance learning h. consolidate skills of problem-solving and critical thinking i. practice active and independent learning skills j. practice interpersonal and communication skills with clients and other professionals k. present both written and verbal reports in a professional manner
Subject Synopsis/ Indicative Syllabus	1. Professional code of ethics and expectations of students' behaviors in clinical setting 2. Case management and clinical reasoning skills

<table>
<tr><td></td><td>3. Assessment of clients' occupational performance
4. Formulation of clients' treatment plan
5. Implementation of occupational therapy activities and programs
6. Evaluation and documentation of clients' progress and occupational performance
7. Evaluation of selected treatment modality</td></tr>
<tr><td>Teaching/Learning Methodology</td><td><u>Clinical Practice in Clinical Settings Supervised by Clinical Educator</u>
a. Clinical observations enable students to understand and clarify functional problems of clients with disability and the use of occupational therapy assessments and interventions in clinical practice
b. Hands-on practice provides students with structured opportunities to plan and implement occupational therapy assessments and interventions under the guidance of clinical educators
c. Tutorials and student-led seminars enable students to clarify questions, discuss topics of clinical interest, and consolidate the integration of clinical knowledge and practice</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
<tr><td rowspan="2">Specific assessment methods/tasks</td><td rowspan="2">% weighting</td><td>Intended subject learning outcomes to be assessed</td></tr>
<tr><td>A - K</td></tr>
<tr><td>Continuous assessments</td><td>100</td><td>As a whole</td></tr>
<tr><td>Total</td><td>100 %</td><td></td></tr>
</table>
<u>Continuous assessments</u>
Continuous assessments towards overall grade (100%) – are appropriate as students' professional competence in terms of attitude, knowledge and skills are continuously developed and evaluated throughout the period of clinical education.
</td></tr>
<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Clinical contact:</td><td>(280 Hrs.)</td></tr>
<tr><td>▪ Clinical practice</td><td>280 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(127 Hrs.)</td></tr>
<tr><td>▪ Pre-and post-clinical seminars</td><td>7 Hrs.</td></tr>
<tr><td>▪ Self study</td><td>120 Hrs.</td></tr>
<tr><td>Total student study effort</td><td><u>407 Hrs.</u></td></tr>
</table>
</td></tr>
<tr><td>Reading List and References</td><td>Alsop, A, & Ryan, S. (1996). Making the Most of Fieldwork Education: A Practical Approach. London: Chapman & Hall.</td></tr>
</table>

Subject Code	**RS5374**
Subject Title	**CLINICAL EDUCATION IV**
Credit Value	7
Level	5, Year 2 – Semester 6
Pre-requisite	RS5373 Clinical Education III
Objectives	This subject provides students with the opportunity to integrate and consolidate knowledge, skills and attitudes learned in school to occupational therapy practice in a common or a particular clinical specialty. It provides students with the opportunity to practice basic clinical management functions for independent occupational therapy practice and day-to-day operation of an occupational therapy department. It also prepares students to evaluate the application of occupational therapy models of practice to common clinical specialties of occupational therapy practice.
Intended Learning Outcomes	***Upon completion of the subject, students will be able to:*** <u>*Professional/academic knowledge and skills*</u> a. gather relevant information to facilitate the selection, conduction and evaluation of assessment b. select, plan, conduct, and evaluate appropriate treatment modalities/programs for specific clients both in a clinical setting and in an appropriate rehabilitation environment c. evaluate the effectiveness of treatment d. present verbal and written occupational therapy reports as an effective means of professional communication e. account professionally in accordance with the Code of Ethics of Supplementary Medical Profession Ordinance f. practice with the supervision of clinical educators or supervisors selected day-to-day administration of the occupational therapy department g. conduct preliminary evaluation on different treatment approaches to prepare for further in-depth evaluation and studies in the Hong Kong Polytechnic University h. identify interested areas for future personal and professional development i. search for relevant reference materials to enhance learning j. work with group mates and other members in the team in the learning activities <u>*Attributes for all-roundedness*</u> k. search for and review relevant reference materials to enhance learning l. practice active and independent learning skills m. consolidate skills of problem-solving and critical thinking n. practice interpersonal and communication skills with clients

<table>
<tr><td></td><td>and other professionals
o. present both written and verbal reports in a professional manner.</td></tr>
<tr><td>Subject Synopsis/ Indicative Syllabus</td><td>1. Professional code of ethics and expectations of students' behaviors in clinical setting
2. Case management and clinical reasoning skills
3. Assessment of clients' occupational performance
4. Formulation of clients' treatment plan
5. Implementation of occupational therapy activities and programs
6. Evaluation and documentation of clients' progress and occupational performance
7. Evaluation of selected treatment modality
8. Participation in selected day-to-day departmental administration procedures</td></tr>
<tr><td>Teaching/Learning Methodology</td><td><u>Clinical Practice in Clinical Settings Supervised by Clinical Educator</u>
a. Clinical observations enable students to understand and clarify functional problems of clients with disability and the use of occupational therapy assessments and interventions in clinical practice
b. Hands-on practice provides students with structured opportunities to plan and implement occupational therapy assessments and interventions under the guidance of clinical educators
c. Tutorials and student-led seminars enable students to clarify questions, discuss topics of clinical interest, and consolidate the integration of clinical knowledge and practice</td></tr>
<tr><td>Assessment Methods in Alignment with Intended Learning Outcomes</td><td>
<table>
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<tr><td>Continuous assessments</td><td>100</td><td>As a whole</td></tr>
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<tr><td>Student Study Effort Expected</td><td>
<table>
<tr><td>Clinical contact:</td><td>(280 Hrs.)</td></tr>
<tr><td>▪ Fieldwork practice</td><td>280 Hrs.</td></tr>
<tr><td>Other student study effort:</td><td>(127 Hrs.)</td></tr>
<tr><td>▪ Pre-and post-clinical seminars</td><td>7 Hrs.</td></tr>
</table>
</td></tr>
</table>

	▪ Self study	120 Hrs.
	Total student study effort	**<u>407 Hrs.</u>**
Reading List and References	*Alsop, A, & Ryan, S. (1996). Making the Most of Fieldwork Education: A Practical Approach. London: Chapman & Hall.*	