THE HONG KONG POLYTECHNIC UNIVERSITY 香港理工大學

Academic Year 2022-2023

POSTGRADUATE SCHEME IN REHABILITATION SCIENCES

(SCHEME HANDBOOK)

MSC IN MANIPULATIVE PHYSIOTHERAPY

MSC IN OCCUPATIONAL THERAPY

MSC IN REHABILITATION OF PEOPLE WITH DEVELOPMENTAL DISABILITIES

> MSC IN REHABILITATION SCIENCES

> > MSC IN SPORTS PHYSIOTHERAPY



This Scheme Handbook would apply to all cohorts of students in the Scheme for the academic year - 2022/23

This Scheme Handbook is subject to review and changes which the Department may decide to make from time to time. Please refer to the handbook put up on the following website at http://www8.rs.polyu.edu.hk/subjectlibrary/cms/default1.aspx for updates.

This Scheme Handbook contains information known as of August 2022.

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1. Introduction

1.1 In response to the emerging needs in rehabilitation and health care professions and an increasing demand of evidence-based practice among their respective professionals (Hospital Authority, 2000), the Department of Rehabilitation Sciences, being the tertiary sole provider of education and training of rehabilitation professionals, took the initiative to launch a self-financed Postgraduate Scheme in Rehabilitation Sciences (PgS RS). The purpose of the Postgraduate Scheme is twofold, namely, to strengthen students' scientific knowledge and research skills so that they are better prepared to perform evidence-based practice, and to equip students with competence of specialized practices, which could lead to national and/or international certifications or recognition.

The PgS RS was developed under the scientist/practitioner model, a well-recognized model of training health care and rehabilitation professionals. The model emphasizes on the necessity of training scientific research skills, clinical competence and the integration of theory and practice. As indicated in the curriculum, the PgS RS programme consists of a core component of scientific research, and its application along with knowledge and skills for a specialized clinical practice in rehabilitation. The programme is unique in its cognizance of integrating theory and practice with an emphasis on evidence-based practice across the curriculum. Equally important is the flexibility of the programme in allowing students to choose their programme of study in accordance with their own personal goals or needs for specialization.

1.2 General Information

Scheme Title	: Postgraduate Scheme in Rehabilitation Sciences		
Scheme Code	: 51062		
Host Department	: Department of Rehabilitation Sciences		
Mode of Attendance	: Mixed-mode		
Normal Duration	: 2.5 years for part-time mode; 1 year for full-time mode Summer terms are utilized for either mode. Students should complete the programme within the normal duration of the programme as specified. Those who exceed the normal duration of the programme will be de- registered from the programme unless prior approval has been obtained from relevant authorities.		

Total Credit Requirements: 30

Award Titles & Code¹

MSc in Manipulative Physiotherapy (MPF/MPP) MSc in Occupational Therapy (OTF/OTP) MSc in Rehabilitation of People with Developmental Disabilities (DDF/DDP) MSc in Rehabilitation Sciences (RSF/RSP) MSc in Sports Physiotherapy (SPF/SFP)

1.3 Our mission is to promote excellence, innovation, and leadership in the fields of rehabilitation sciences. The Department will achieve this through:

<u>C</u>reating an enriched environment that fosters the integration of the best practices of East and West to develop a body of knowledge central to occupational therapy and physiotherapy.

 $\underline{\mathbf{A}}$ dvancing education for our students through the dedication of our teaching and clinical staff members who are committed to life-long learning and the use of innovative technologies.

 $\underline{\mathbf{R}}$ esearch activities, which achieve the highest international standards in rehabilitation sciences to inform teaching and underpin evidence-based practice.

 $\underline{\mathbf{E}}$ nhancing the quality of life for the communities of interest through service and leadership by our students, graduates, and staff.

2. Aims, Philosophy, Institutional and Programme Intended Learning Outcomes of the Scheme

- 2.1 Rehabilitation sciences are the systematic study of disablement across the needs of the individual, community, and society. Disablement is conceptualized as overlapping domains of pathophysiology, impairment, functional limitation, and societal limitation (Nagi, 1991). The World Health Organization (WHO) has recently redefined the concept of body functions and structures (impairment), activities (disability), and participation (handicap) from the International Classification of Functioning, Disability and Health (ICF) (WHO, 2001) (Figure. 1). To enhance the functional performance of people with disabilities, rehabilitation should focus on the two key factors, namely, the personal and environmental factors, in addition to the physical factors. These are by far the most critical factors that determine the participation of people with disabilities in our society and their degree of functional limitation.
- 2.2 To enhance integration of persons with disabilities into the mainstream society, rehabilitation practice should be extended from hospitals and rehabilitation centres to the clients' home and work place. Our PgS RS will prepare rehabilitation professionals to advance their knowledge and skills, with a strong theoretical and scientific foundation of evidence-based practice responsive to both personal and environmental factors. The Manipulative Physiotherapy award focuses on the advancement of professional practice through clinical practice in which an

¹ Stream codes are shown in brackets. XXF refers to a programme on a full-time mode, while XXP refers to a programme on a part-time mode.

individual's functions would be maximized. The Occupational Therapy award enables students to meet the changing clients' needs and contribute to the development of occupational therapy practices both local and overseas. The award in Rehabilitation of People with Developmental Disabilities equips students with an advanced knowledge for the evidence-based practice in the field of developmental disabilities both local and overseas. The award in Sports Physiotherapy aims to equip students with an advanced knowledge in Sports Physiotherapy and enable them to meet the changing needs of Sports Physiotherapy service in Hong Kong. The Award offers unique clinical specialization in the practice of sports physiotherapy, by introducing sports clinics placement, on-field sports physiotherapy services, and attachment to professional sports team.

2.3 Institutional Learning Outcomes (Taught Postgraduate) (ILOs)

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 below 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.

- 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.
- 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.
- 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.
- 2.4 One of our Departmental missions is to facilitate lifelong learning. This Scheme is specially designed to enhance professional skills and knowledge, along with the advancement of analytical skills and problem solving abilities of our graduates. Evidence-based practice learned through the MSc curriculum will then be integrated into the professional practice, thereby improving the physical, social, and psychological function of persons with disabilities.
- 2.5 The aims of the programme are:
 - > To equip the students with advanced knowledge base and skills in a chosen area of specialization, so as to enable them to meet the changing needs in rehabilitation practice and contribute to the development of rehabilitation

specialty practices in Hong Kong;

- ➤ To equip the students with a lifelong ability to critically analyze and evaluate ongoing practice so that the quality of professional practice can be advanced and ensured;
- ➢ To develop knowledge and skills in areas of specialization relevant to the professional discipline, so as to improve professional competence.
- 2.6 Programme Intended Learning Outcomes (PILOs)

Programme intended learning outcomes refer to the intellectual abilities, knowledge and skills that all graduate of postgraduate programmes under the Scheme of Rehabilitation Sciences should possess.

On successful completion of the Programme, a student will be able to: Scheme Level

- 1. Apply in-depth knowledge and skills in health and related sciences to rehabilitation studies and practice.
- 2. Analyze and evaluate concepts, theories and model related to health care and/or rehabilitation practice
- 3. Apply critical inquiry process, including systematic reviews, to support and improve health care/rehabilitation services.

Programme Level:

MSc in Manipulative Physiotherapy (MScMP PILOs)

- 1. Demonstrate the level of proficiency, confidence and independence in the safety use of manipulative physiotherapy expected of a graduate in the field.
- 2. Critically evaluate the suitability and effectiveness of the management methods and treating patients in the framework of evidence-based approach.
- 3. Demonstrate a lifelong ability to critically analyze and evaluate ongoing physiotherapy practice so that the quality of practice can be advanced and ensured.

MSc in Occupational Therapy (MScOT PILOs)

- 1. Develop theory-driven, evidence-based and client-centered innovations in occupational therapy practice.
- 2. Integrate discipline-specific and cross-disciplinary knowledge and skills to enable occupation in challenging contexts and emerging practice.
- 3. Demonstrate professional growth through critically reflecting on the use of occupation as means and ends in the increasingly complex everyday practice.

MSc in Rehabilitation of People with Developmental Disabilities (MScRDD PILOs)

- 1. Update and possess the knowledge on management of people with developmental disabilities
- 2. Apply and integrate team concept in management of people with developmental disabilities
- 3. Apply the skill in management of people with developmental disabilities

MSc in Rehabilitation Sciences (MScRS PILOs)

1. Apply in-depth knowledge and skills in rehabilitation sciences area to

professional practice and contribute to professional leadership.

- 2. Think critically and provide innovative solutions in dealing with problems and issues encountered in clinical practice.
- 3. Demonstrate an enhanced capability for continual professional development through inquiry and reflection on professional practice.

MSc in Sports Physiotherapy (MScSP PILOs)

- 1. Critically analyse and evaluate ongoing sports physiotherapy practice
- 2. Apply in-depth knowledge and skills in areas of sports physiotherapy to improve their evidence-based professional practice.
- 3. Demonstrate an enhanced capability for continual professional development through inquiry and reflection in professional practice
- 2.7 Relationship between Institutional Learning Outcomes (ILOs) and Programme Intended Learning Outcomes (PILOs):

	Institutional Learning Outcomes for Graduates at Taught Postgraduate Degree Level			
Programme Intended Learning Outcomes:	Professional Competence of specialists/leaders of a discipline/profession:	Strategic thinking:	Lifelong learning capability:	
Scheme Level			1	
PILO (1)	\checkmark	\checkmark		
PILO (2)	\checkmark	\checkmark		
PILO (3)		\checkmark	\checkmark	
Programme Level				
MSc in Manipulative Ph	ysiotherapy			
MScMP PILOs (1)		\checkmark		
MScMP PILOs (2)	\checkmark	\checkmark		
MScMP PILOs (3)		\checkmark	\checkmark	
MSc in Occupational Therapy				
MScOT PILOs (1)	\checkmark	\checkmark		
MscOT PILOs (2)	\checkmark	\checkmark		
MscOT PILOs (3)		\checkmark	\checkmark	
MSc in Rehabilitation of People with Developmental Disabilities				
MScRDD PILOs (1)	\checkmark	\checkmark		
MScRDD PILOs (2)	\checkmark			
MScRDD PILOs (3)				

MSc in Rehabilitation Sciences			
MScRS PILOs (1)	\checkmark	\checkmark	
MScRS PILOs (2)	\checkmark	\checkmark	
MScRS PILOs (3)		\checkmark	\checkmark
MSc in Sports Physiotherapy			
MScSP PILOs (1)	\checkmark	\checkmark	
MScSP PILOs (2)	\checkmark	\checkmark	
MScSP PILOs (3)		\checkmark	\checkmark

2.8 Curriculum Mapping

A curriculum map (Appendix) 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 2.6

3. Conceptual Framework of the Scheme

- 3.1 The PgS RS aims to provide a series of postgraduate studies to meet the rehabilitation practitioners' professional and personal development needs, by providing a flexible programme of study related to practice. The curriculum of the Scheme is designed to strengthen the students' scientific knowledge and research skills so that they are better prepared to perform evidence-based practice and to increase their competence of specialized practices, such as manipulative physiotherapy, rehabilitation for people with developmental disabilities, sports physiotherapy, and others.
- 3.2 Over the past ten years, rehabilitation professionals have adopted the traditional medical model in their practice. The model views disability as a personal problem, directly caused by disease, trauma, or other health conditions, which require individual treatment under medical care. Management of disability aimed at cure or the individual's adjustment and behavioral change (WHO, 2001).
- 3.3 The social model of disability views disability as a societal problem, which is not an attribute of an individual, but rather a complex collection of conditions, many of which are created by the social environment. Promoting full integration and participation of the individual into society is the main theme of this model.
- 3.4 ICF (WHO, 2001) is based on an integration of these two opposing models. In order to capture the integration of the various perspectives of an individual's functioning level, a "biopsychosocial" approach is used. Thus, the ICF attempts to achieve a synthesis, thereby providing a coherent view of the different perspectives of health from the biological, individual, and social standpoints.

- 3.5 By adopting the revised ICF model, the PgS RS focuses not only on the advancement of our graduates in clinical specialization to resolve the medical problems associated with diseases or trauma, but also prepares the graduates to improve the clients' functioning through environmental or societal intervention. The PgS RS is structured to develop several specializations of studies. One of the awards, MSc in Rehabilitation Sciences, is developed to enhance students' understanding and practices of the innovative treatment approaches and practices in the field of rehabilitation.
- 3.6 There is evidence to support that manipulative physiotherapy is more effective than placebo treatment (Koes et al., 1992; Van Tulder et al., 1997); medical care, bed rest, analgesics, and massage (Van Tulder et al., 1997); conventional physiotherapy including massage, exercise and electrotherapeutics (Twomey and Taylor, 1995) and back education (Triano et al., 1995). By advancing the clinical skills in manipulative physiotherapy for our graduates, it is expected that more patients can achieve higher levels of functioning when the medical problems are resolved.
- 3.7 MSc in Occupational Therapy is designed to meet the demands of the fast development of occupational therapy knowledge and skills. A range of subjects that are specific to the occupational therapy profession are offered, namely in the areas of neurological, productivity and vocational or east-meets-west rehabilitation. These will enable the students to become specialists in their areas of expertise. Students who are inclined to specialize in psychosocial and geriatric rehabilitation can further discuss their needs with the award coordination for special arrangement prior to the application.
- 3.8 MSc in Rehabilitation of People with Developmental Disabilities is designed with an aim to enrich students' knowledge and leadership through a variety of subjects, both theoretical and practical, which are relevant to the global needs of people with developmental disabilities. Students will find this programme intellectually challenging and helpful to their career development. The programme also enhance the application of inter-disciplinary team approach and evidence-based practice to develop attitudes and qualities appropriate for independent and partnership professional practice for people with developmental disabilities. On completion, graduates will be better equipped to adopt a leadership role in their chosen career.
- 3.9 It is well established that regular participation in sports activity has beneficial effects on many systems of the body, including reduction of risk factors for cardiovascular disease, such as obesity and hypertension (U.S. DHHS, 1991). Indeed, the Department of Health of Hong Kong has launched a campaign of "Sports for All" so as to increase people's awareness of the benefits of exercise participation and their regular participation. With the successful bidding for the hosting of Olympics 2008 at Beijing, participation in sports and physical activity in Hong Kong is becoming more popular. Alongside with the recognition of the health benefits associated with sports participation. Sports physiotherapy has a unique role in the enhancement of sports performance, prevention and rehabilitation of sports injuries. The award in Sports Physiotherapy is a timely program that aims to equip students with the knowledge and skills in the provision of sports physiotherapy in this expanding demand of service.

- 3.10 All students should possess a solid conceptual and knowledge base to substantiate his/her practice in a specialty area. One or two clinical subjects may be developed in each award to enhance the integration of theory and skills in advanced practice.
- 3.11 Upon graduation, the graduates are expected to possess competence in specialized rehabilitation knowledge and skills to underpin evidence-based practice. These graduates are expected to take up a leadership role in the advancement of professional practices. In addition to the academic qualification achieved, graduates may be recognized for their specialization internationally.
 - 3.11.1. Students who successfully complete the manipulative physiotherapy award are eligible to apply for full membership of Manipulative Therapy Specialty Group of the Hong Kong Physiotherapy Association, which is a member organization of the International Federation of Orthopaedic Manipulative Physical Therapists (IFOMPT). IFOMPT recognises that the programme is of IFOMPT standard. They may also apply for membership in the Musculoskeletal Physiotherapy Australia and the New Zealand Manipulative Physiotherapists Association.
- 3.12 The PgS RS offers a flexible curriculum of study to cater to the individual needs of our graduates as well as the ever-changing demands of the society. If demands warranted, new specialized programmes of study will be developed within the Scheme to meet the professional and societal needs.



Figure 1: The International Classification of Functioning, Disability and Health (ICF) model by World Health Organization (2001)

4. Level of Award

The PgS RS is based on a credit-based system where credit transfer and credit exemption can be granted, subject to the decision of the programme committee and the Head of Department. The Scheme will grant the award of Master of Science (MSc) and Postgraduate Diploma (PgD) to the students who have completed the required content as stipulated in each award.

4.1 Master of Science (MSc) Award

All students enrolled into this Scheme are expected to complete the study and graduate with a Master degree.

To be eligible for the MSc in Manipulative Physiotherapy award, a student shall complete 30 credits, which include:

- a. One compulsory subject: "Research methods and data analysis" (3 credits);
- b. Seven core subjects (21 credits) (It includes two subjects of clinical practice); and
- c. One project study (6 credits).

To be eligible for other awards, a student shall complete 30 credits, which include:

- a. One compulsory subject: "Research methods and data analysis" (3 credits);
- b. Five core subjects from the selected award of studies (15 credits) (It may include one or two subjects of clinical practice);
- c. Two elective subjects (6 credits); and
- d. One project study (6 credits).

4.2 <u>Postgraduate Diploma (PgD) Award</u>

For student who fails to fulfill the requirements of the MSc award, the Department may consider granting the student an award of postgraduate diploma (PgD). To be eligible for the award, a student shall complete 24 credits for a PgD in Manipulative Physiotherapy or 18 credits for other PgD awards, out of which 15 credits are related to the practices of rehabilitation sciences.

For PgD in Manipulative Physiotherapy, the subjects include:

- a. One compulsory subject: Research Methods and Data Analysis*(3 credits); and
- b. Seven core subjects from the selected award of studies* (21 credits)

For other PgD awards, the subjects include:

- a. One compulsory subject: Research Methods and Data Analysis* (3 credits);
- b. Four core subjects from the selected award of studies* (12 credits); and
- c. One elective subject (3 credits)
- (* Subjects related to the field of rehabilitation sciences and practices)

5. Mode of Study

It is expected that a student will complete the study within two and a half years for part-time mode or within one year for full-time mode.

6. Entrance Requirements

6.1 Bachelor's degree in a related rehabilitation discipline from The Hong Kong Polytechnic University or a recognized institution or equivalent; preferably with one year post qualification working experiences in related rehabilitation field; <u>or</u>

Professional diploma in a related rehabilitation field from the former Hong Kong Polytechnic or a recognized institution or equivalent; with two years of working experiences and evidence of continuous education over the recent two years.

For specific entrance requirements into individual awards, please refer to item 8.3.

6.2 Language Requirements

Applicants who are not native speakers of English, or whose Bachelor's degree or equivalent qualification is awarded by institutions where the medium of instruction is not English, should fulfil the following minimum English language requirement for admission purpose, unless otherwise specified by individual programmes concerned:

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).

7. Credit Transfer, Exclusion and Exemption without Credit (Please also see item 12)

- 7.1 Credit transfer could only be granted for subjects at the postgraduate levels. Normally, not more than 50% of the credit requirement for the academic award may be transferable from approved institutions outside The Hong Kong Polytechnic University (PolyU). For transfer of credits from programmes offered by PolyU, normally not more than 67% of the credit requirement for the award can be transferred. In cases where both types of credits are being transferred (i.e. from programmes offered by PolyU and from approved institutions outside the University), not more than 50% of the credit requirement for the academic award may be transferred. All credit transfer and exemption are subject to the approval of the Department based on the relevance, equivalence and currency of the subjects to this programme of study.
- 7.2 The grades achieved in subjects taken as part of a PolyU postgraduate award for which credit transfer is approved will contribute towards the students' Grade Point Average (GPA). Grades achieved for other postgraduate study programme, which is not part of a PolyU programme will not contribute towards the students' GPA (credit transfer without the grade carried). The credits transferred will count towards the credit requirement for the award.
- 7.3 The validity period of subject credits earned is five years from the year of attainment, i.e. the year in which the subject is completed, unless otherwise specified by the Department responsible for the content of the subject. Credits earned from previous

study should remain valid at the time when the student applies for transfer of credits. For exceptional cases, subject offering Departments shall have the discretion to approve the transfer of credits which have exceeded the validity period on a case-by-case basis. All such exceptional cases must be reported to the Faculty Board with full justification.

8. The Scheme Structure

- 8.1 The PgS RS offers a flexible pattern of postgraduate studies for advancement of clinical skills and knowledge from the pool of subjects offered by the Department. Each student is required to complete 30 credits for a MSc award (Fig. 2 and Fig. 3).
- 8.2 The Scheme consists of five awards, namely Manipulative Physiotherapy, Occupational Therapy, Rehabilitation of People with Developmental Disabilities, Rehabilitation Sciences, and Sports Physiotherapy. Students can opt to take any award of study within the Scheme. To provide guidance to the students during the selection of their individual specialization, the subjects offered in the PgS RS are classified as:

8.2.1 Core Subjects

For each award of study, each student will be asked to select respective core subjects from within the Department's course offerings with a total credit value of 21 (seven subjects) for MSc in Manipulative Physiotherapy and 15 (5 subjects) for other awards. There may be one or two clinical practice subjects that a student has to select as the core subjects for some awards.





8.2.2 <u>Elective Subjects</u>

Except MSc in Manipulative Physiotherapy, each student will be required to choose two elective subjects either within the Department or other departments, each carries a 3-credit value. Students who have chosen an award of study under the Scheme will be advised to take elective subjects relevant to the award.

8.2.3 Compulsory Subjects

The Scheme requires all students to take and pass the subject on "Research Methods and Data Analysis". All MSc students must complete the Project Study, which carries 6 credits of the course. Students may enroll in the Project Study when they have:

- a. Completed the subject "Research Methods and Data Analysis"
- b. Obtained an overall GPA of 2.5 at their stage of study.

8.3 Awards of Study in PgS RS

8.3.1 <u>Rehabilitation Sciences</u>

The award in Rehabilitation Sciences is to meet the needs of professionals who would like to specialize and enrich their knowledge and practices in the area of rehabilitation. The aim of this programme of study is to enhance students' in-depth understanding of different practices in rehabilitation, thus enriching their knowledge in field of rehabilitation.

The award in Rehabilitation Sciences includes a required component of scientific research and its application (9 credits) along with 15 credits of studies in the field of rehabilitation. Clinical practicum course is not required but students are encouraged to take a subject in "Independent study".

The independent study offers a flexible study pattern and encourages more self-directed learning for adult learners. Students can choose any subjects offered by the Department of Rehabilitation Sciences as the core subjects. The elective subjects could be selected from other programmes that are of relevance to the field of study in rehabilitation. The student along with his/her supervisor could develop his/her own programme of study tailored-made for their personal and vocational needs.

i. Programme of Study

To be eligible for the award of MSc in Rehabilitation Sciences, a student has to complete one compulsory subject, five core subjects offered by our Department, two elective subjects and a project study as listed below.

One compulsory subject (3 credits)

RS517 Research methods and data analysis

Five core subjects (15 credits)

Students can choose all postgraduate subjects listed in the Department of Rehabilitation Sciences on conditions that they fulfill the pre-requisite of each subject they have selected.

For example:

RS510	Neuro-psychological rehabilitation
RS537	Psychosocial rehabilitation for people with developmental disabilities
RS593	Sensory and motor intervention for people with developmental disabilities
RS5224	Research Seminar in Rehabilitation Sciences
RS595/RS596	Independent study I/II
RS607	Brain and behaviour

Two elective subjects (6 credits)

All students can opt to select subjects run in the Department of Rehabilitation Sciences or other departments but related to rehabilitation practice.

For example: RS538

RS538	Psychometric theories and practice
RS6004	Advances in congenital pathophysiology and pediatric
	rehabilitation

Project study (6 credits)

RS567 Project study

ii. Admission Requirement

A Bachelor's degree in rehabilitation-related disciplines (e.g. healthcare, biomedical sciences, exercise sciences, health and well-being, etc.) from PolyU or a recognised institution or the equivalent, preferably with 1 year of post-qualification work experience in rehabilitation; OR

A professional diploma related to rehabilitation from PolyU or a recognised institution or the equivalent, with 2 years of work experience and evidence of continuous education over the past 2 years.

8.3.2 <u>Manipulative Physiotherapy</u>

The award in manipulative physiotherapy provides an opportunity for practicing physiotherapists to specialize in the area of manipulative therapy practice, with an evidence-based and clinical-informed approach. Until 1997, the PolyU had mounted two post-experience certificates courses in spinal and peripheral manipulative therapy. With integral components of advanced knowledge in pathoanatomy, physiology, joint biomechanics and kinematics, the skills of manipulative physiotherapy may now be supported scientifically. Together with the project component, students may be equipped with the skills of evaluating future advances in manipulative techniques and concepts. This education process in lifelong learning may prepare specialists in managing changes and challenges in the area of manipulative physiotherapy.

i. Programme of Study

To be eligible for the award of MSc in Manipulative Physiotherapy, a student has to complete one compulsory subject, seven core subjects offered by our Department and a project study as listed below.

One compulsory subject (3 credits)

RS517 Research methods and data analysis

Seven core subjects (21 credits)

- RS600 Diagnostic procedures in musculoskeletal physiotherapy
- RS5216 Musculoskeletal injury and repair
- RS554 Physical diagnosis of neuro-musculoskeletal disorders
- RS555 Advanced principle and practice of manipulative physiotherapy (Lower quarter)
- RS556 Advanced principle and practice of manipulative physiotherapy (Upper quarter)
- RS5220 Advanced manipulative physiotherapy practice I
- RS5221 Advanced manipulative physiotherapy practice II

Project Study (6 credits)

RS567 Project study

ii. Admission Requirement

A Bachelor's degree in physiotherapy from PolyU or a recognized institution or the equivalent, preferably with 1 year of post-qualification work experience in physiotherapy;

OR

A professional diploma in physiotherapy from PolyU or a recognized institution or the equivalent, with 2 years of work experience in physiotherapy and evidence of continuous education over the last 2 years.

8.3.3 <u>Occupational Therapy</u>

The MSc in Occupational Therapy helps to equip students with a broadened and deepened knowledge base and skills, and enable them to develop lifelong learning and abilities to critically analyze and evaluate ongoing professional practices so that the quality of practice can be advanced and ensured.

i. Programme of Study

To be eligible for the award of MSc in Occupational Therapy, a student has to complete one compulsory subject, five core subjects offered by our Department, two elective subjects and a project study as listed below.

One compulsory subject (3 credits)

RS517 Research methods and data analysis

Five core subjects (15 credits)

- RS510 Neuro-psychological rehabilitation
- RS520 Vocational rehabilitation
- RS538 Psychometric theories and practice
- RS587 Complementary and alternative therapies
- RS588 Theories and practice of counseling for rehabilitation and health professionals
- RS5200 Advanced occupational therapy study
- RS5201 Current development in neurological rehabilitation
- RS5202 OT management for upper extremity participation in neurological conditions
- RS5212 Advanced OT practice in hand rehabilitation
- RS5224 Research Seminar in Rehabilitation Sciences

Two elective subjects (6 credits)

For example:

- RS504 Clinical measurement & evaluation
- RS537 Psychosocial rehabilitation for people with developmental disabilities
- RS606 Advanced Study in Autism Spectrum Disorder

Project Study (6 credits)

RS567 Project Study

ii. Admission Requirement

A Bachelor's degree in occupational therapy or related occupational therapy training from PolyU or a recognized institution or the equivalent, preferably with 1 year of post-qualification work experience in occupational therapy; OR

A professional diploma in occupational therapy from PolyU or a recognized institution or the equivalent, with 2 years of work experience and evidence of continuous education over the past 2 years.

8.3.4 Rehabilitation of People with Developmental Disabilities

Studies are multi-disciplinary and students are selected from different professional backgrounds, though all share an interest in working with people with developmental disabilities. The teaching team includes occupational therapists, physiotherapists, educators, social workers, psychologists and speech therapists. The programme's multi-disciplinary nature not only advances students' knowledge of professional practice, but also expands their perspective in the field of rehabilitation. i. Programme of Study

To be eligible for the award of MSc in Rehabilitation of People with Developmental Disabilities, a student has to complete one compulsory subject, five core subjects offered by our Department, two elective subjects and a project study as listed below.

One compulsory subject (3 credits)

RS517 Research methods and data analysis

Five core subjects (15 credits)

- RS537 Psychosocial rehabilitation for people with developmental disabilities
- RS593 Sensory and motor intervention for people with developmental disabilities
- RS594 Recent advances in rehabilitation for people with developmental disabilities
- RS606 Advanced Study in Autism Spectrum Disorder
- RS5223 Management of executive function deficits for people with developmental disabilities
- RS520 Vocational rehabilitation
- RS588 Theories and practice of counseling for rehabilitation and health professionals
- RS5203 Case management of people with developmental disabilities
- RS5224 Research seminar in rehabilitation sciences

Two elective subjects (6 credits)

For example:

- RS538 Psychometric theories & practice
- RS595 Independent study I
- RS596 Independent study II

Project study (6 credits)

RS567 Project study

ii. Admission Requirement

A Bachelor's degree in occupational therapy, physiotherapy, nursing, psychology, social work, speech therapy, education, or a related healthcare discipline from PolyU or a recognised institution or the equivalent, preferably with 1 year of post-qualification work experience with people with developmental disabilities;

OR

A professional diploma in occupational therapy, physiotherapy, nursing, psychology, social work, speech therapy, education, or a related healthcare discipline from PolyU or a recognised institution or the equivalent, with 2 years of work experience and evidence of continuous education over the past 2 years.

8.3.5 Sports Physiotherapy

Upon graduation, the graduates are expected to possess competence in the knowledge and skills that underpin evidence-based practice in sports physiotherapy. These graduates are expected to take up a leadership role in the advancement of professional practices. In addition to the academic

qualification achieved, graduates may be recognized for their specialization by the community.

i. Programme of Study

To be eligible for the award of MSc in Sports Physiotherapy, a student has to complete one compulsory subject, five core subjects offered by our Department, two elective subjects and a project study as listed below.

One compulsory subject (3 credits)

RS517 Research methods and data analysis

Five core subjects (15 credits)

- RS600 Diagnostic procedures in musculoskeletal physiotherapy
- RS5216 Musculoskeletal injury and repair
- RS581 Advanced practice and clinical integration in sports physiotherapy
- RS598 Clinical practice I in sports physiotherapy
- RS599 Clinical practice II in sports physiotherapy

Two elective subjects (6 credits)

For example:RS580 Theory and practice of sports physiotherapyRS5210 Contemporary issues in exercise science and exercise prescription

Project Study (6 credits)

RS567 Project Study

ii. Admission Requirement

A Bachelor's degree in physiotherapy or related rehabilitation disciplines from PolyU or a recognized institution or the equivalent, preferably with one year of post-qualification work experience in physiotherapy; OR

A professional diploma in physiotherapy or related rehabilitation disciplines from PolyU or a recognized institution or the equivalent, with two years of work experience and evidence of continuous education over the past two years.

9. Teaching and learning methods

9.1 <u>Classroom Teaching and Demonstration</u>

- 9.1.1 The teaching and learning activities within the Scheme are coherently organized according to the nature and demands of the particular subject areas. Students entering this Scheme should have the academic background to engage in self-directed learning. A variety of learning methods including lectures, laboratory work, seminars, tutorials, case study, guided study, web-based consultation and clinical practicum will be employed.
- 9.1.2 Lectures are conducted in large groups to present the theoretical aspects of a subject in a broad perspective. Laboratory work aims at providing students

with hands-on practice of knowledge and skills learned in lectures, such as assessment, interview and treatment skills. Seminars provide opportunities for students to present their views and ideas to develop their self-reflection, and to enhance inter-disciplinary or multi-disciplinary practices in the field of rehabilitation. Tutorials will be used to clarify concepts learned and to share experiences among students and lecturers. Students are encouraged to actively participate in the seminars and tutorials for intellectual exchange and in-depth learning. Case studies are used to contrast and compare treatment approaches and to illustrate how theories could be applied onto clinical cases. Live demonstrations may be necessary to facilitate the teaching learning process. Guided study will enable students to reflect their observations and knowledge. Web-based consultation in the form of chat-room, net meetings and bulletin board services are options for all students.

9.2 Independent Study

The independent study is based on the theoretical development of self-directed learning and transformative learning in adult education. The student will conduct the learning programme under the guidance of a faculty member who is an expert in a subject area selected by the student. The learning objectives will be developed between the student and the supervisor. The student will then direct his/her own learning process, become aware of the assumptions about learning and revise them through self-reflection.

The philosophy of establishing this independent study is to allow flexibility and individualism in adult learning. Student can take their own pace of study, choose an area of particular interests to suit individual needs and to formulate his/her study plan. Normally this course will take the form of a closely supervised reading programme in an area of the supervisor's expertise, but may also include the development clinical skills and practice. Students have to demonstrate their abilities in problem-solving, analytical thinking, and self-reflection throughout the process of study.

On completion of the subject, each student is asked to submit a written report to reflect students' understanding of a chosen topic, the learning process and the self-reflections. The report will be assessed to determine if a student has fulfilled the learning objectives that have been formulated in the beginning of the study. Students may utilize the learning outcomes of the independent study to further develop into the project work that he/she will pursue later, such as the preparation of an in-depth literature review on an area of practice for the project work.

9.3 <u>Clinical Practicum/Clinical Internship</u>

9.3.1 One of the key features in this Scheme is the integral clinical practicum. These practical subjects will facilitate students' specific clinical skills through the provision of clinical placements for students during the course of study. Students will work under guidance, to integrate, apply and evaluate knowledge and skills to clients with dysfunction. Clinical associates with at least three years post-professional qualification experiences will be employed to guide students in the advancement of clinical skills through the clinical practicum. These clinical placements will be arranged between Universities and clinical centres from Hospital Authority and other voluntary agencies.

The operation and implementation of the clinical practicum are illustrated in MSc in Manipulative Physiotherapy and MSc in Sports Physiotherapy as below.

9.3.2 The two clinical practicum subjects in MSc in Manipulative Physiotherapy (Advanced manipulative physiotherapy practice I and II) are the apexes of the study. Here students will integrate and utilize the principles and skills in the diagnosis and manipulative treatment that they have learned in classrooms and apply them in real life situations and environments.

Advanced manipulative physiotherapy practice I demands accurate diagnosis of common musculoskeletal disorders. Advanced manipulative physiotherapy practice II builds on the experience from Practice I and progress into the integrative use of the manipulative techniques with other physiotherapeutic modalities. Students are expected to make progressively independent clinical decisions in typical busy environment of public and private clinics.

Most teaching activities in the two practical subjects will be conducted in physiotherapy outpatient department (POPD) in The Hospital Authority (HA) in the evenings. Presently the use of POPD in the Prince of Wales Hospital is well established. Staff and patient acceptance to the evening clinics is most satisfactory.

Patients seeking treatment at the POPD will be solicited to gain their consent to be treated by postgraduate students from the PolyU under supervision in the evenings. Operation of the clinics will then be identical to other POPD's in which students would be most familiar with.

Two evening clinic sections are planned for each week (e.g. Monday Thursday and Tuesday Friday). Students will be divided into two groups, one group for each of the section. Likewise there will be two teaching teams for the two sections.

The student to staff ratio (SSR) is five to one. This is the internationally accepted minimal ratio for postgraduate education in Manipulative Physiotherapy.

With such close working environment in the POPD, formal (in the form of staff meetings) and informal communication between members of the teaching teams would be most effective. Progress of each student will be monitored throughout the subject. Seminars and case presentations in tutorial groups are subject requirements. Regular discussions and feedback, both formal (at midblock and at the end) and informal, are given to students. Strength and weakness are identified. Specific goals and time scales are agreed to encourage effort.

9.3.3 The MSc Sports Physiotherapy award offers unique clinical specialization in the practice of sports physiotherapy, by introducing sports clinics placement,

on-field sports physiotherapy services, and attachment to professional sports team.

The two clinical practicum subjects (Clinical practice I and II in sports physiotherapy) in Sports Physiotherapy provide integration of the subject knowledge into clinical practice. Here students will integrate and utilize the principles and skills in the diagnosis and sports injuries management that they have learned in classrooms and apply them in real life situations and environments.

Clinical Practice I aims to provide students the opportunities to work as onfield sports physiotherapists, and the management of injured athletes in sports clinics. Most teaching activities in this clinical placement will be conducted at the University Rehabilitation Clinic and the Sports Physiotherapy Clinic of the Hong Kong Sports Institute. The University Rehabilitation Clinic provides ample opportunities for sports physiotherapy practice to the university sports team as well as athletes from the community and sports association. The Sports Physiotherapy Clinic at the Hong Kong Sports Institute is the flagship for the care of the elite athletes in Hong Kong. Here, students learn to integrate the knowledge and application of sports physiotherapy skills to the assessment and management of elite professional athletes. Patients seeking treatment at the two clinics will be solicited to gain their consent to be treated by postgraduate students from the PolyU under supervision in the evenings.

The focus with the Clinical Practice II is to further advance the students' competence in the management of professional athletes. Given the complexity and unique opportunity to observe the training of specific sport event, students will have better understanding to the injury mechanism and apply appropriate rehabilitation techniques or/and injury prevention strategies. The Clinical Practice II will be conducted either in the Sports Hospital of the National Sports Training Center, Beijing, Guangdong Sports Technical Institute, Guangzhou, China or similar setting where students will have ample opportunity to observe the training of the professional athletes, the injury prevention, and management program. For this clinical placement, academic staff as well as the faculty from the hosting institute will be involved in the supervision of the students.

9.4 Project Study

All students will be required to do a project as partial fulfillment of the requirements for the Master degree. The purpose is to encourage critical thinking and independent learning, and to provide a vehicle for specialization of professional knowledge. A supervisor will be assigned to each student as soon as he is enrolled into the Postgraduate Scheme. A project proposal will be formulated according to the student's study plan and interests. It will then be subjected to formal review by staff members. The supervisor will ensure that there will be sufficient resources to support the project. The proposal has to be approved by the project coordinator before the student enrolls in the subject. The project work may take any form, and examples of project work are provided in the subject description form. Upon completion of the project, students will be required to submit a final written report. The format of the report will be decided by the student and the supervisor. The report may take the form of a manuscript that may subsequently be submitted to a professional journal. This may be the appropriate form if the project is a conventional research study. It may also be a treatise, which is an in-depth exploration of professional knowledge, a consultancy or technical report, or a business plan. Examples of some project work are listed in the subject description form.

It should be pointed out that the philosophy of project work is different from that of the conventional dissertation study. It provides the most flexible mode of learning, and does not restrict the students to conventional research models. The emphasis will be on professional knowledge development, creative and independent learning rather than acquisition of research skills and experience. This is in line with the general philosophy of the PgS, which is to produce competent rehabilitation professionals rather than research scientists.

The project report will be assessed to determine if a student has fulfilled the objectives of the study as listed. The specific assessment criteria of a report may vary in different cases depending on the nature of the project. The criteria will be agreed upon by the project coordinator and the supervisor prior to the examination.

10. Examination and Assessment

- 10.1 Assessment in this Scheme helps to identify students' strengths and weaknesses and to assess the extent to which the students have benefited from the designated programme of study. It also serves the function to evaluate the curriculum in terms of effectiveness of teaching and learning.
- 10.2 The performance of a student is assessed mainly by continuous assessment. Continuous assessment has been chosen for most subjects to give recognition to the continuous effort put in by students. The various components of assessment should help the testing and development of students' abilities more comprehensively.
- 10.3 The extent to which a student has met the aims of a particular subject is assessed and recorded immediately upon its completion. Assessment of students takes place exclusively within subjects. This allows students to assess their progress and make choices regarding their continuing programme of study. Subject description forms specify how a subject will be assessed in terms of the proportion of examination to course work. The basis on which grades are to be awarded is linked with the objectives of each subject.
- 10.4 It is intended that a variety of assessment methods, such as open book examinations oral presentation, written reports, will be used. All other forms of assessment are included in term course work. This may include essays, seminar papers, presentation, projects, case studies, laboratory work, class tests and work done individually or in groups. The contribution made by each student in course work involving a group

effort shall be determined and assessed separately. The assessment of each subject will pay particular attention to assessment methods, which test for understanding and match the objectives of the subject.

In some subjects, some assessments are conducted during the course of study such as seminar presentation and case reports. Class attendance and participation are also counted towards the final grade of the subject. For other subjects, the assessments are conducted at the end of the subject to assess the overall performance of students. Some examples of the end of subject assessments are practical tests, written test, and written assignment and project report.

10.5 There is no formal examination in whole Scheme. In some programmes of study, such as manipulative physiotherapy, there are pre-requisites listed in some subjects to ensure students' progression in various stages of learning. For example, a student must pass the practical tests in the subject "RS554 Physical diagnosis of neuro-musculoskeletal disorder" (see subject description form) in order to progress to the study of "RS555 Advanced principle and practice of manipulative physiotherapy (lower quarter)". The practical tests will serve as formal assessments to ensure progression of students at different stages of study. The project study report is also regarded as a formal assessment to benchmark the standards of our students to be at the Master level.

10.6 Assessment grades shall be awarded on a criterion-referenced basis. A student's overall performance in a subject shall be graded as follows from 2020/21 onwards.

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.

10.6.1 "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.

10.7 <u>Retaking of Subjects</u>

- 10.7.1 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.
- 10.7.2 The number of retakes of a subject should be restricted to two, i.e. a maximum of three attempts for each subject is allowed.

- 10.7.3 In cases where a student takes another subject to replace a failed elective subject, the fail grade will be taken into account in the calculation of the GPA, despite the passing of the replacement subject.
- 10.7.4 Students need to submit a request to the Faculty/School Board for the second retake of a failed subject.
- 10.7.5 Students who have failed a compulsory subject after two retakes and have been de-registered can submit an appeal to the Academic Appeals Committee (AAC) for a third chance of retaking the subject.
- 10.7.6 In relation to 10.7.5 above, in case AAC does not approve further retakes of a failed compulsory subject or the taking of an equivalent subject with special approval from the Faculty, the student concerned would be de-registered and the decision of the AAC shall be final within the University.

10.8 Progression/Academic Probation/Deregistration

- 10.8.1 The Board of Examiners shall, at the end of each semester (except for Summer Term unless there are students who are eligible to graduate after completion of Summer Term subjects), determine whether each student is
 - (i) eligible for progression towards an award; or
 - (ii) eligible for an award; or
 - (iii) required to be de-registered from the programme.
- 10.8.2 When a student has a Grade Point Average (GPA) lower than 1.7, he will be put on academic probation in the following semester. Once when a student is able to pull his 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 assessment result notification but not in transcript of studies.
- 10.8.3 A student will have 'progressing' status unless he falls within any one of the following categories, which shall be regarded as grounds for deregistration from the programme:
 - (i) the student has exceeded the maximum period of registration for that programme as specified in the Scheme Handbook (applicable to students admitted in or before 2019/20); or
 - (ii) the student has reached the final year of the normal period of registration for that programme, as specified in the Scheme Handbook, unless approval has been given for extension (applicable to students admitted in or after 2020/21): or
 - (iii) the student has reached the maximum number of retakes allowed for a failed compulsory subject; or
 - (iv) 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
 - (v) the student's GPA is lower than 1.7 for three consecutive semesters.

- 10.8.4 When a student falls within any of the categories as stipulated above, except for category (ii) with approval for extension, the Board of Examiners shall deregister the student from the programme without exception.
- 10.8.5 A student may be de-registered from the programme enrolled before the time frame specified in Sections 10.8.3 (iv) or 10.8.3 (v) above if his/her academic performance is poor to the extent that the Board of Examiners deems that his/her chance of attaining a GPA of 1.70 at the end of the programme is slim or impossible.
- 10.8.6 The progression of students to the following academic year will not be affected by the GPA obtained in the Summer Term, unless Summer Term study is mandatory for all students of the programme and constitutes a requirement for graduation, and is so specified in the Scheme Handbook.

10.9 Graduation Requirements

- 10.9.1 For the award of a Master's degree, students must accumulate the required number of credits for the award including credits from a required number of subjects in a specified core list and have passed the project study in an approved topic.
- 10.9.2 For both the PgD and MSc awards, the student's final Grade Point Average (GPA) must be 1.7 or above.
- 10.9.3 A student must satisfy the residential requirement for at least 1/3 of the credits to be completed for the award he is currently enrolled, unless the professional bodies stipulate otherwise.
- 10.9.4 The awards of Master's are classified as: Distinction, Credit, and Pass.
- 10.9.5 A student is required to graduate as soon as he/she satisfies all the conditions for award (see 10.9.1 to 10.9.3 above). He/She may be allowed to take more taught subjects than he/she needs to graduate in or before the semester within which he/she becomes eligible for award. Subject to the maximum study load of 21 credits per semester and availability of places, a student may take more credits than he needs to graduate on top of the prescribed credit requirements for his award in or before the semester within which he becomes eligible for award.
- 10.9.6 A student must complete the e-Learning module "Understanding China and the Hong Kong Special Administrative Region, P.R.C." and the related assessment will be included as a graduation requirement for Taught Postgraduate (TPg) from the 2022/23 intake cohort.

10.10 Grade Point Average (GPA)

10.10.1 The GPA for the Master's awards is calculated based on the assessment results achieved by the student on the subjects he/she has taken to meet the requirement for that award. If a student passes more elective subjects than those required for graduation in or before the semester in which he becomes

eligible for an award, the elective subjects with a higher grade/contribution shall be included in the GPA calculation for award classification (i.e. the excessive subjects attempted with a lower grade/contribution, including failed subjects, will be excluded from the GPA calculation for award classification). If a student passes more core subjects than the requirement for graduation, the extra core subject(s) with a lower grade/contribution to the GPA will be considered along with the elective subjects for the purpose of GPA calculation for award classification.

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

$GPA = \frac{\sum_{n=1}^{N} Subject \ Grade \ Point_n \times Subject \ Credit \ Value_n}{\sum_{n=1}^{N} Subject \ Credit \ Value_n}$

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:

- (i) Exempted subjects
- (ii) Ungraded subjects
- (iii) Incomplete subjects
- (iv) Subjects for which credit transfer has been approved without any grade assigned
- (v) Subjects from which a student has been allowed to withdraw (i.e. those with the grade 'W')

If the student has registered for a project study, the credits and grade point for the project study will also be included in the above sums upon the completion of the project report.

- 10.10.3 If credit transfer has been granted, only those subjects for which a grade has been awarded within one of PolyU's postgraduate programmes will be counted in calculating the sums in 10.10.2. If credit transfer has been approved without the grade carried, those subjects will not be included within the sums shown in 10.10.2. 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 taken as "zero" grade point.
- 10.10.4 Since all taught subjects offered within the postgraduate programme are at the same level, they contribute equally to the calculation of the GPA.
- 10.10.5 GPA is an indicator of overall performance, and ranges from 0.00 to 4.30 from 2020/21.

10.11 Guidelines for Award Classification

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

	Guidelines
Distinction	The student's performance/attainment is outstanding, and identifies him 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 reached a standard of performance/attainment ranging from just adequate to satisfactory.

10.12 Students should be granted a Master's award without having to submit an application for graduation under the following condition:

10.12.1 He/She has fulfilled all the requirements for a Master's award.

- 10.13 Condition 10.12.1 applies only when the student has a valid registration status. If a student's registration status has been set to "Study ended" due to non-compliance with PolyU regulations, for example, failure to pay fees, he/she will not be eligible for the award unless his/her registration status has been reinstated.
- 10.14 Under special circumstances when a student is unable to fulfill the requirements to graduate with an MSc award, the Department may consider granting the student with an award of Postgraduate Diploma (PgD) in Rehabilitation sciences. To be eligible for the award, the student should complete 24 credits for a PgD in Manipulative Physiotherapy or 18 credits for other PgD awards stipulated in item 4.2.

11. Departmental Policy/Guidelines on Student Misconduct

Penalty – PolyU Student Handbook

- 11.1 The University may take disciplinary actions against any student (including graduand, who has satisfied all the academic requirements for graduation but has not been officially conferred the award) who commits any misconduct, violates the laws of Hong Kong or any of the University's regulations and rules (including but not limited to those listed in the Regulations on Student Discipline in the PolyU Student Handbook). Cases may be referred to the Student Discipline Committee (SDC) for investigation and decision.
- 11.2 Appropriate disciplinary actions, depending on the seriousness of the case, will be taken against a student (including a graduand who has satisfied all the academic

requirements for the award but who has not been presented at the Congregation) who is found guilty of the alleged offence. Penalties include:

- ➤ reprimand;
- community services;
- making good, in whole or in part, any damage or loss to the property of the University, or of members of the University community;
- suspension from part or all of the rights, privileges and / or the use of part or all of the facilities of the University for a specified period of time;
- disqualification of results;
- Iowering the award classification by one level upon graduation;
- suspension from the University for a specified period of time;
- deferment of graduation or withholding the issuance of award parchment (for graduands);
- termination of studies; and
- > any other penalties as considered appropriate.
- 11.3 Students who are found guilty of the alleged offences (academic or non-academic) will normally be put on "disciplinary probation". The status of "disciplinary probation" will be shown on their records and documents such as assessment result notification, transcript of studies and testimonial during the probation period. This status will be removed upon their leaving the University. The disciplinary probation will normally be one year unless otherwise decided by SDC.
- 11.4 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 such as eligibility for scholarships / awards / prizes, candidatures of being selected as outstanding students / Student Ambassadors and taking up or continuing to hold leadership roles within the University. They may also be given lower priority in Student Hall residency, funding and subsidies for student projects, courses / activities, overseas academic exchange, internship jobs, mentorship programmes, overseas WIE.
- 11.5 Students who are subject to disciplinary action can approach the Student Affairs Office (SAO) for counselling service and assistance. Students attending hearings of SDC may ask a staff member of the University or a University student of their own choice to accompany them. Students will not be legally represented at the meeting nor be assisted by someone who is a practising lawyer. The person accompanying the student will be an observer at the meeting of the SDC and will not take part in the discussion.
- 11.6 Students who are expelled from the University for disciplinary reasons will not be eligible for refund of the caution money paid.

Misconduct during Clinical Placements – RS Department

11.7 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
- 11.8 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 minimises risk to clients, self, and others, or 2) adhere to ethical and/or legal practice standards, or 3) complete any placement component(s) without legitimate reasons, the student will be awarded a grade 'F' (Failed).

Bibliography

Purtilo, R. (1999). *Ethical Dimensions in the Health Professions*. 3rd Edition. Ch.6. Philadelphia: Saunders.

University of Northern British Columbia. Web source: <u>http://www.unbc.ca/asc/writing_support/downloadable_writing_resources.html</u>

Websites for information on academic writing:

http://edc.polyu.edu.hk/PSP/student.htm http://www.dcccd.edu/SS/Academics/Libraries/Pages/ResearchTutorials.aspx http://www.writing.utoronto.ca/advice/using-sources/how-not-to-plagiarize http://www.plagiarism.org/ http://plagarism.com http://plagarism.com http://www.northwestern.edu/uacc/plagiar.html http://www.northwestern.edu/uacc/plagiar.html http://www.millikin.edu/academics/cas/muwc/Pages/Resources.aspx http://owl.english.purdue.edu/ http://www.powa.org/ http://www.unbc.ca/asc/writing_support/downloadable_writing_resources.html

12. Departmental Guidelines for Granting Credit Transfer

- 12.1 Providing that clauses 12.3 and 12.4 below are met, credit transfer could be granted for subjects at the postgraduate level on a case-by-case basis by the subject leader, subject to endorsement by the Award Coordinator and approval by the Head of the Department of Rehabilitation Sciences.
- 12.2 According to University regulation, a maximum of 50% of the required number of the approved subjects can be transferred if the subjects are obtained outside PolyU, and a maximum of 67% of an award if the credits are earned from within PolyU. In

case where both types of credits are approved for transfer, not more than 50% of the required number of credits is permitted for transfer.

- 12.3 The granting of credit transfer is a matter of serious academic judgement based on the relevance, equivalence and currency of the subjects to the programme of study. In assessing the transferability of subjects previously taken, subject leaders should observe the following guidelines:
 - > The academic standing of the institution offering the subject must be credible and verification must be sought when in doubt.
 - ➤ The content and assessment method of the subject, e.g. syllabus and handouts, must be critically scrutinized to ascertain that they are comparable (not less than 80%) to our existing curriculum.
 - The subject size must be the same, e.g. in the number of credits earned.
 - The subject must have received at least a grade of B or equivalent.
- 12.4 In order to meet the fast changing knowledge and techniques in the field of rehabilitation, it is important to maintain up-to-date knowledge and skills in all the subjects contained in our programmes of study. Therefore, the validity of the subjects earned is five years from the year of attainment.

13. 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 an online SFQ (eSFQ) to provide feedback on their experience of studying a subject. This eSFQ 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.

14. Compulsory completion of Online Tutorial on Academic Integrity

To help you understand the importance of academic honesty and learn ways to ensure that your work and behaviour at PolyU are acceptable in this regard, the Online Tutorial on Academic Integrity is provided for your MSc programme. You need to complete the Tutorial by week 4.

The Online Tutorial is part of the programme completion requirement. If you have completed the online tutorial on academic integrity in PolyU before, you may submit application for exemption to the Award Coordinator (via General Office) for consideration.

For more information on the Online Tutorial, please refer to Student Guide on Online Tutorial on Academic Integrity: https://www.polyu.edu.hk/ogur/docdrive/Academic Integrity/Student Guide.pdf

The Online Tutorial can be accessed on LEARN@PolyU (理學網). It takes approximately two hours to complete. To access the Tutorial, simply:

- Log in to LEARN@PolyU (理學網) using your NetID and password.
- Go to "Courses" and click on the link to PolyU1001: Online Tutorial on Academic Integrity (Compulsory Completion).

Postgraduate Scheme in Rehabilitation Sciences (Scheme Code: 51062)

Staff List Scheme Chairperson Prof. Hector Tsang **Scheme Coordinator** Dr. Cynthia Lai Room No.: ST540 Tel. No.: 2766 6710 **Award Coordinators** MSc in Manipulative Physiotherapy Dr. Sharon Tsang *Room No.: ST*535 Tel. No.: 2766 4332 MSc in Occupational Therapy Dr. Sam Chan Room No.: ST533 Tel. No.: 2766 4310 Dr. Will Chien MSc in Rehabilitation of People with Developmental Disabilities Room No.: ST513 Tel. No.: 2766 6703 MSc in Rehabilitation Sciences Dr. Benson Lau Room No.: ST507 Tel. No.: 2766 6712 MSc in Sports Physiotherapy Prof. Amy Fu Room No.: QT506 Tel. No.: 2766 6726 **Project Coordinator** Dr. Benson Lau Room No.: ST507 Tel. No.: 2766 6712

General Office Locat	tion:	QT512
General Enquiry Tel	No:	2766 6728
Fax No	÷	2330 8656
Curriculum Map

This curriculum map gives a holistic view of the degree to which each intended learning outcome will be taught and assessed in Postgraduate Scheme in Rehabilitation Sciences

The following 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.
 - (Reinforced) That the learning leading to the particular intended outcome is reinforced/emphasized in that subject.
- A (Assessed)

R

That the performance which demonstrates the particular intended outcome is assessed in that subject

	Programme Intended Learning Outcomes (ILOs)	RS517	RS567	RS510	RS520	RS537	RS538	RS554	RS555	RS556	RS576	RS580	RS581	RS587	RS588	RS593	RS594	RS595	RS596	RS598	RS599	RS5200	RS5201	RS5202	RS5203	RS5210	RS5212	RS5216	RS5220	RS5221	RS5223	RS5224	RS600	RS606	RS607	RS6004
ILOs at S	cheme Level																																			
1.	Acquire in-depth knowledge and skills in health and related sciences to broaden its application in rehabilitation		А	R	А	Ι	IA	R A	R A	R A	А	R	R	R	A	R	A	R A	R A	А	R	A			R	R	R	R	R A	R A	R A	I R	RA		R A	I R A

			_	-					_								_	_	_		-				_					_			 	
2.	Analysis and evaluate concepts, theories and model related to health care and/or rehabilitation practice		А	А	А	R		R A	R A	R A	А	R	R	R	А	R	А	R A	R A	А	R	R		R	R	R A	А	R A	R A	R A	I R	R A	I R	R A
3.	Apply critical inquiry process, including systematic reviews, to support and improve health care/ rehabilitation services.	I R A	Α	А	R	R	I A	R A	R A	R A	А	R	R	R	R	R A	Α	R A	R A	А	R	Α		Α	R	R	А	R A	R A	R A	Ι	R A	R	R
ILOs at P	rogramme Level	l fo	r N	1Sc	e in	M	ani	pu	lati	ive	Ph	ysi	oth	era	apy	r																		
4.	Demonstrate the level of proficiency, confidence and independence in the safety use of manipulative physiotherapy expected of a graduate in the field.			Ι				I R A	I R A	I R A								R A	R A								R	R A	R A			I A		

5.	Critically evaluating the suitability and effectiveness of the management methods and treating patients in the framework of evidence-based approach.			R				R A	I R A	I R A							R A	R A								R	R A	R A		R A			
6.	Demonstrate a lifelong ability to critically analyze and evaluate ongoing physiotherapy practice so that the quality of practice can be advanced and ensured.			Ι	•			R	R	R							R A	R A								A	R	R		R A			
ILOs at P	rogramme Level	fo	r N	ISc	e in	Oc	cu	pat	ioi	ial	Th	era	ıpy			 			-	-	-												
7.	Advance occupational therapy practice by developing theory-driven, evidence-based and client- centered innovations.			А	Α									R A	A		R A	R A			А	I R A	I R A		R						R A	R	

8.	Enable occupation by integrating discipline-specific and cross- disciplinary knowledge and skills to manage challenging contexts and develop emerging practice.			R	R]	[R			R A	R A			А	I R	Ι		R				R	R	
9.	Enrich continual professional growth by critically reflecting on the use of occupation as means and ends in the increasingly complex everyday practice.			R	R]	[A	R			R A	R A			А	I R	I R A		R A			I R	R A	R A	
ILOs at P	rogramme Level	for	·M	[Sc	in	Re	ehal	oili	tati	ion	of	Peo	ple	W	rith	ı D	eve	eloj	om	ent	al 1	Dis	abi	iliti	ies							
10.	Update the knowledge on management of people with developmental disabilities.			Ι	R	Ι]	[A	R	R	A	R A	R A						R			R A		R A		R
11.	Understand team concept in management of people with developmental disabilities.			R	R	R A									R	R A	R	R A	R A						А			Ι		R		R
12.	Advance the skill in management of people with developmental.			R	R	R A]	[4	R	R	А	R A	R A						A			R A	I R	R A		R

ILOs at l	Programme Leve	l fo	r N	1Sc	: in	Re	ehal	bili	itati	on	Sc	ien	ces	5														 _	
13.	Possess in-depth knowledge and skills in rehabilitation sciences area and be able to apply their knowledge and skills contribute to professional leadership.			Ι	Ι									R A	Ι		R A	R A					A	R		I R A			I R A
14.	Think critically and provide innovative solutions in dealing with clinical practice.			R	R									R A	Ι		R A	R A					A	R		I R	R A	I R	R A
15.	Have an enhanced capability for continual professional development through inquiry and reflection on professional practice.			R	Ι									R A	R									А		I R A	R A	R	R
ILOs at l	Programme Leve	l fo	r N	1Sc	: in	Sp	ort	s P	hys	iot	heı	rap	ŊУ																
16.	Demonstrate the competence in the knowledge and skills that underpin evidence-based practice in sports physiotherapy.			Ι							A	А	A				R A	R A	А	А				R			R A		

17.	Possess the knowledge and skills in areas of specialization relevant to sports physiotherapy discipline, and to improve their professional competence in this specialization.		Ι					A	A			1	R	R A	A	A				А			R A		
18.	Demonstrate a lifelong learning and ability to critically analyze and evaluate ongoing sports physiotherapy practice		R				A	A	A			1	2	R A	Α	A				А			R A	R	

PART B: SUBJECT DESCRIPTION FORMS

- RS: MSc in Rehabilitation Sciences
- MP: MSc in Manipulative Physiotherapy
- OT: MSc in Occupational Therapy
- DD: MSc in Rehabilitation of People with Developmental Disabilities
- SP: MSc in Sports Physiotherapy
- C: Core subject

Code	Title	Page	RS	MP	ОТ	DD	SP
RS517	Research Methods & Data Analysis	3		Co	mpuls	ory	
RS567	Project Study	6		Co	mpuls	ory	
RS510	Neuro-psychological Rehabilitation	8			C		
RS520	Vocational Rehabilitation	10			С	C	
RS537	Psychosocial Rehabilitation for People with Developmental Disabilities	13				С	
RS538	Psychometric Theories and Practice	15			С		
RS554	Physical Diagnosis of Neuro- Musculoskeletal Disorders	18		C			
RS555	Advanced Principle and Practice of Manipulative Physiotherapy (Lower Quarter)	21		С			
RS556	Advanced Principle and Practice of Manipulative Physiotherapy (Upper Quarter)	24		C			
RS576	Integrated Sports Science & Medicine	27]	Elective	e	
RS580	Theory and Practice of Sports Physiotherapy	29]	Elective	e	
RS581	Advanced Practice and Clinical Integration in Sports Physiotherapy	31					C
RS587	Complementary and Alternative Therapies	33			C		
RS588	Theories and Practice of Counseling for Rehabilitation and Health Professionals	35			С	C	
RS593	Sensory and Motor Intervention for People with Developmental Disabilities	38				С	
RS594	Recent Advances in Rehabilitation for People with Developmental Disabilities	41				C	
RS595/ RS596	Independent Study I/II	44]	Elective	e	
RS598	Clinical Practice I in Sports Physiotherapy	46					C
RS599	Clinical Practice II in Sports Physiotherapy	48					C

Code	Title	Page	RS	MP	ΟΤ	DD	SP
RS5200	Advanced Occupational Therapy Study	50			C		
RS5201	Current Development in Neurological Rehabilitation	52			C		
RS5202	OT Management for Upper Extremity Participation in Neurological Conditions	55			C		
RS5203	Case Management of People with Developmental Disabilities	58				С	
RS5210	Contemporary Issues in Exercise Science and Exercise Prescription	61			Elective	e	
RS5212	Advanced OT Practice in Hand Rehabilitation	64			C		
RS5216	Musculoskeletal injury and repair	67		С			С
RS5220	Advanced Manipulative Physiotherapy Practice I	69		С			
RS5221	Advanced Manipulative Physiotherapy Practice II	72		С			
RS5223	Management of Executive Function Deficits for People with Developmental Disabilities	75				С	
RS5224	Research Seminar in Rehabilitation Sciences	77	C		C	C	
RS600	Diagnostic Procedures in Musculoskeletal Physiotherapy	79		С			С
RS606	Advanced Study in Autism Spectrum Disorder	81				C	
RS607	Brain and Behaviour	84	C				
RS6004	Advances in Congenital Pathophysiology and Pediatric Rehabilitation	87			Elective	e	

<u>Notes</u>:

1. Please refer to section 8 of the Scheme Handbook for the details about core and elective subjects for each programme.

2. Core subjects for a specific award can be selected as elective subjects for other awards.

3. Students can choose relevant MSc subjects of the Department of Rehabilitation Sciences available to them to fulfill the core/elective subject requirements, on condition that they meet the "Pre-requisite/Co-requisite/Exclusion" of the subjects concerned.

Subject Code	RS517
Subject Title	Research Methods & Data Analysis
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil Recommended: Basic knowledge of research methods equivalent to the final year of a recognized undergraduate programme of a health care discipline.
Objectives	The subject is designed to provide students with an in-depth knowledge of research methodologies and data analysis. It equips students with theoretical knowledge and analytical skills required to design or critique research studies.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Develop a researchable question. b. Describe the various study designs and their pros and cons. c. Explain the principles involved in measurement and instrumentation. d. Develop a conceptual model in outcomes research. e. Select appropriate statistical methods to analyze data and interpret research findings, including the use of software packages (e.g. SPSS). f. Critically evaluate scientific research publications.
Subject Synopsis/ Indicative Syllabus	 Developing research developing a researchable question, study designs, conceptual modeling, research proposal writing Measurement issues measurement tools, measurement reliability and validity Paradigms of research experimental studies, correlational studies, descriptive studies, epidemiology, qualitative research, survey studies, systematic review, meta-analyses Methods of data analysis qualitative data quantitative data (with the use of software packages such as SPSS) Evaluating research Critical appraisal of selected scientific publications

Teaching/Learning Methodology	Lectures will cover the ma sessions, students will learn procedures (including the u the findings.	ijor concepts n how to sele use of SPSS)	related ct and 1 for dif	to resea perform ferent re	arch me approp esearch	ethodolo priate sta questio	ogies. In atistical ns and	n tutorial analysis interpret				
Assessment Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend	led subj sed (Ples	ect lear ase tick	ning ou as appr	tcomes opriate	to be)				
Intended Learning Outcomes			a	b	с	d	e	f				
	1. Online quizzes	20					\checkmark					
	2. Written test	50					\checkmark					
	3. Research proposal	30				\checkmark	\checkmark	\checkmark				
	Total	100 %										
	Explanation of the appro intended learning outcomes	priateness of	f the a	ssessme	ent met	hods in	n asses	sing the				
	Online quizzes: This asses material covered each week	sment aims t x.	o evalu	ate the	student	's unde	rstandii	ng of the				
	Written test: This assessme major concepts learned in the	ent aims to e he semester.	valuate	the stu	dent's u	indersta	nding o	of all the				
	Research proposal: The stu the semester and write up a	idents are rec research prop	juired to posal.	o integr	ate wha	at is lea	rned th	roughout				
Student Study	Class contact:						(39	Hrs.)				
Effort Required	• Tutorial						2	7 Hrs.				
	• Online lectures						1	2 Hrs.				
	Other student study effort:						(88	Hrs.)				
	• Self-study						4	8 Hrs.				
	Course works (research pro	posal writing)				(40	Hrs.)				
	Total student study effort						12	7 Hrs.				
Reading List and References	<u>Required textbook:</u> Portney LG, Watkins MP. Practice. 3rd International e	(2013) Foun ed. Essex: Pea	dations Irson	of Clin	iical Re	search.	Applic	ations to				
	Reference texts: Barbour RS. (2008) Introd of Doing Qualitative Resea	ucing Qualita rch. London:	ualitative Research: a Student's Guide to the Craft don: Sage Publications.									
	Berg BL. (2007) Qualitativ Pearson/Allyn & Bacon.	e Research N	/lethods	for the	Social	Science	es. Bost	on, MA:				
	Huizingh E. (2007) Applied	d Statistics wi	th SPSS	S. Lond	on: Sag	e Public	ations.					

Knowles JG, Cole AL. (2008) Handbook of the Arts in Qualitative Research: Perspectives, Methodologies, Examples, and Issues. Los Angeles: Sage Publications.
Leary MR. (2008) Introduction to Behavioral Research Methods. Boston, MA: Allyn and Bacon.
Levin J. (2007) Elementary Statistics in Social Research: the Essentials. Boston: Pearson Allyn & Bacon.
Peacock JL. (2007) Presenting Medical Statistics from Proposal to Publication: a Step- by-Step Guide. Oxford, New York: Oxford University Press.
Rubin A. (2007) Statistics for Evidence-based Practice and Evaluation. Belmont, CA: Thomson Higher Education.
Willis J. (2007) Foundations of Qualitative Research: Interpretive and Critical Approaches. Thousand Oaks: Sage Publications.

Subject Code	RS567
Subject Title	Project Study
Credit Value	6
Level	5
Pre-requisite / Co-requisite/ Exclusion	Pre-requisite: Completion of RS517 Research Methods & Data Analysis or equivalent knowledge
Objectives	To provide an opportunity for the students to apply the acquired knowledge in other theoretical subjects to a practical project. Through the project study, students are expected to develop critical thinking, analytical and evaluative skills.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Pursue an in-depth study of a professional issue which is relevant to a chosen area of specialisation, b. Develop critical thinking, analytical and evaluative skills through the conduct of the project, and c. Develop the ability to write and present in a scientific context.
Subject Synopsis/ Indicative Syllabus	There is no syllabus for project work. The student may choose to perform project work in an area related to the chosen field of specialisation. The area chosen has to be approved by the project coordinator. The supervisor will ensure that there will be sufficient resources to support the project.
	 Examples of project work include an in-depth exploration of a controversial professional or academic issue, evaluation of clinical assessment or treatment method, development of new rehabilitation device, development of clinical administration strategy social science studies examining behavioural changes that occur in people with physical disabilities, action research into educational issues, and clinical case study.
	The chosen project may be related to one of the current research activities of the department or the workplace of the student.
	 a manuscript that may subsequently be submitted to a professional journal. This may be the appropriate form if the project is a conventional research study. a treatise which is an in-depth exploration of professional knowledge a consultancy or technical report, for example, in the case of technical evaluation of a new device a business plan if the project involves management strategy development
	The project report will be assessed to determine if a student has fulfilled the learning outcomes of project study as described above. The specific assessment criteria of a report may vary in different cases depending on the nature of the project. The criteria will be agreed upon by the project coordinator and the supervisor prior to the examination. The following lists the criteria that will be used for some types of projects.

Teaching/Learning Methodology	 Experimental project with submission of a manuscript - presentation, research design, credibility, implementation, analysis, potential to be published Treatise - presentation, depth and breath of knowledge demonstrated, analysis, insight into the issue, conclusions/recommendations Technical report - presentation, method, implementation, analysis, recommendations for users Business plan - presentation, justification and feasibility of the idea, market analysis, management and implementation, financial plan, analysis Self-directed learning. Each student will be assigned a supervisor and required to complete a team project. A study plan (learning contract) will be formulated in the beginning of the study, according to the interest of the student and the supervisor. The student will be expected to meet regularly with the supervisor, but work independently. 						
Assessment Methods in Alignment with Intended Learning	Specific assessment methods/tasks% weightingIntended subject learning outcomes to be assessed (I tick ✓ as appropriate)						
Outcomes		(0)	a	b	с		
	1. Final Project Report	60	~	~	✓		
	2. Oral Presentation	30		~	✓		
	3. Assessment of Individual Contribution to Project	10	~	~	~		
	Total	100%					
	The project report must reflect sufficient evidence of independent work and a level of professional knowledge that one would normally expect at the Master level. The report will be assessed by the project supervisor and a staff member who has not been involved in the supervision. The final project report (60%) is a group assessment component. Oral presentation (15-40 minutes; 8-10 minutes/member) of the project will be required at the end of the second semester. Oral presentation (30%) will be assessed based on each individual members performance during presentation. Each member should take part in the presentation and Q&A sessions. The grades/mark should be given by the supervisor and the 2nd examiner. 10% of the total score will be assigned by the supervisor to reflect the contribution of each team member to the project.						
Student Study	Class contact: 20 Hrs						
Effort Expected	 Progress Report and Oral Presentation Each student will be required to submit a written progress report after the completion of the first semester, and present the work orally at the end of the second semester. 						
	Other student study effort: 240 Hrs						
	 Independent study (Project activities and final repo A final written report will be sul 	rt writing) omitted at the	end of the se	cond semes	ster.		
	Total student study effort: 260 Hrs						
Reading List and References	Students will be expected to gather work. They will be provided with a necessary.	information w oppropriate re	which will be ading resour	relevant to ces by the	their project supervisor if		

Subject Code	RS510							
Subject Title	Neuropsychological Rehabilit	ation						
Credit Value	3							
Level	5							
Pre-requisite / Co-requisite/ Exclusion	Nil	Jil						
Objectives	 Evaluate major theoreti rehabilitation. Explore ways to develop strategies for neuropsycho Develop research interes clinical application. 	 Evaluate major theoretical and method development in neuropsychological rehabilitation. Explore ways to develop behavioral and ecological assessment, specific treatment strategies for neuropsychological deficits. Develop research interests which form the base for programme evaluation and clinical application. 						
Intended Learning Outcomes	 Upon completion of the subject a. Select and conduct community. b. Outline major types of nemotion of the subject of the completion of the subject of the subje	 Upon completion of the subject, students will be able to: a. Select and conduct common cognitive assessments for clients with cognitive deficits. b. Outline major types of neuropsychological rehabilitation techniques. c. Appreciate evidence-based cognitive rehabilitation and its applications. d. Understand professional and legal issues in neuropsychological rehabilitation. e. Explore the community reintegration issues and research development in neuropsychological rehabilitation 						
Subject Synopsis/ Indicative Syllabus	 Assessment and methodological issues Neuropsychological rehabilitation techniques Professional and legal issues Neuropsychological rehabilitation and community integration Representative research and application 							
Teaching/Learning Methodology	Face-to-face lectures, together with online self-study video and materials mainly serve to deliver key information on neuropsychological rehabilitation, tutorial is for reinforcing contemporary issues and foresight in related rehabilitation issues. Practical sessions will be used to enhance students' assessment and case management skills.							
Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks	% weighting	Intend assess a	led subj ed (Pleas b	ject lean se tick ✓ a c	rning ou s appropri d	utcomes iate) e	s to be
outcomes	1. Written assignment	60	~	✓	~			
	2. Seminar presentation	40			✓	✓	✓	
	Total	100%						
	Individual written assignment is used to demand students to integrate theory, knowledge and skills in managing a typical type of clients with cognitive deficits. Seminar presentation in a group format will facilitate students to work collaboratively in a topic that demand strong evidence based practice and use of critical and creative thinking for a case scenario.							

Student Study	Class contact:	(33 Hrs.)		
Effort Expected	Lecture	11 Hrs.		
	Tutorial	14 Hrs.		
	Practical	5 Hrs.		
	Seminar	3 Hrs.		
	Other student study effort:	(90 Hrs)		
	Literature search	25 Hrs.		
	Peer group study	25 Hrs.		
	Case study	20 Hrs.		
	Written assignment	20 Hrs.		
	Total student study effort	123 Hrs.		
Reading List and References	Baddeley, A.D., Kopelman, M.D., Wilson, B.A. (2002). <i>The rehabilitation</i> . West Sussex, England: John Wiley & Sons. LTd.	handbook of memory		
	Clare L., Woods, R.T. (2001). Cognitive rehabilitation in dement the Journal of Neuropsychological Rehabilitation. East Sussex: I	<i>tia: A special issue of</i> Psychology Press Ltd.		
	Hill, R.D., Bäckman L., Neely A.S. (2000). <i>Cognitive rehabilite</i> York: Oxford University Press.	ation in old age. New		
	Lezak, M.D., Howieson, D.B., Loring D.W., Hanny H.J., Neuropsychological assessment. (5 th Ed.). New York: Oxford Ur	Fischer, J.S. (2014). niversity Press.		
	Miller D.C. (2010). Best Practices in School Neuropsycho Effective Practice, Assessment, and Evidence-Based Interven Jersey: John Wiley & Sons, Inc.	logy: Guidelines for tion. Hoboken, New		
	Sohlberg, K.M., Mateer, C.A. (2001). Cognitive rehabilita neuropsychological approach. New York: Guildford Press.	tion: An integrative		

Subject Code	RS520
Subject Title	Vocational Rehabilitation
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Recommended background knowledge: Work experience in vocational or pre-vocational rehabilitation setting for people with disabilities such as physical, psychiatric, and developmental disabilities would be an advantage.
Objectives	This subject aims to introduce to students about the current theories, knowledge base, practice, and evidence of vocational rehabilitation. Students are also guided to analyze current system issues in the field and suggest principles or strategies to improve current practice.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Critically evaluate the conceptual models and theories in vocational rehabilitation. b. Select appropriate evaluation tools for vocational assessment persons with disabilities. c. Describe the key strategies of vocational preparation and vocational rehabilitation. d. Evaluate the service models and programmes of vocational preparation and vocational rehabilitation. e. Compare and contrast the perspectives of clients, professionals, and employers on vocational rehabilitation.
Subject Synopsis/ Indicative Syllabus	 Current theories, conceptual models and strategies in vocational rehabilitation Socioeconomic and political context of vocational rehabilitation in local and international scene Vocational assessment and evaluation Vocational rehabilitation programmes Sheltered workshop, supported employment, and customized employment School-to-work transition Vocational psychological well-being Stakeholders involved in vocational rehabilitation
Teaching/Learning Methodology	Lecture: Current theories, rehabilitation strategies, and socio-political context of vocational rehabilitation will be introduced. Tutorials: Students would discuss and debate on selected topics to assist them to deepen understanding of theories and practice issues. Seminars: These are student-led presentations, in which student groups take turns to present specific topics in vocational rehabilitation. Students are required to conduct indepth analysis of issues and make suggestions with sound justifications.

Assessment		1	1							
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick \checkmark as appropriate)							
Intended Learning Outcomes			a	b	с	d	e			
	1.Quiz	30	~	✓	~					
	2.Written Assignment	30		√	~	~				
	3.Seminar Presentation	40	~	~	~	~	~			
	Total	100%			L			•		
	Quiz: It will be focused on a intervention strategies of vo	examining stu ocational rehab	dents' k vilitation	nowled practic	lge on n ce.	nodels,	assessn	nent and		
	Written assignment: Stude interventions for people wit	ents are requ h work injurie	ired to s or disa	evalua abilities	ite voc	ational	assessi	nent or		
	Seminar presentation: Stude on selected current topics in	ents will work vocational re	in smal habilitat	ll projection.	et group	os and l	ead diso	cussions		
Student Study	Class contact:						(39 Hrs.)			
Effort Expected	Seminars						15 Hrs.			
	Guided Study						9 Hrs.			
	Tutorials						15 Hrs.			
	Other student study effort:						(70 Hrs.)			
	 Self-study 						20 Hrs.			
	Preparation of assignments						20 Hrs.			
	Preparation of seminar presentation					30 Hrs.				
	Total student study effort						109	Hrs.		
Reading List and	Textbook									
References	Rubin, S. E., & Roessler, R. T. (2008). Foundations of the vocational rehabilitation process. 6th Ed., Austin, Texas: Pro-Ed.									
	Readings									
	 Bültmann, U., & Siegrist, J. (2020). Handbook of Disability, Work and Springer International Publishing AG. Chan, C. C. H., Li, W. P. C., Hung, L. K. & Lam, P. C. W. (2000). A stand clinical series for work-related lateral epicondylitis. Journal of Occup Rehabilitation, 10, 143-152. 						rk and	Health.		
							lardised pational			
	Demers, L.M. (1992) Work Hardening: A practical guide. Andover Medical Publisher.									
	Grove, B. (1997). Social rehabilitation and integrati wanted to know but didn't k	l firm handb fon of people w now who to as	ook: n with me k. Brigh	ew dir ntal hea nton, Er	<i>ections</i> alth pro igland:	<i>in th</i> oblems: Pavilion	e empl everyth n Pub.	oyment, ning you		
	Lam, C.S., Wiley, A.H., Si	iu, A.M.H., &	Emme	tt, J. (2	010). A	Assessin	ig readi	ness to		

work from a stages of change perspective: Implications for return to work. <i>Work</i> , <i>37</i> , pp.321-329.
Law, C. K. M., Siu, A. M. H., Lee, J. L. Y., & Lee, S. W. K. (2006). Prediction of Work Rehabilitation Placements using the Chinese Work Personality Profile. <i>Psychiatric Rehabilitation Journal</i> , <i>30</i> , 120-128.
Li, E. P. Y. (2000). The school-work transition of people with mental handicap in Hong Kong. <i>Work: A Journal of Prevention, Assessment and Rehabilitation, 14</i> , 217-227.
Li, W.P.C., Chan, F.K.S. & Lui, W.Y. P. (1996). Functional Assessment of Repetitive Strain Injuries. <i>Journal of Hand Therapy</i> , <i>9</i> , 394-398.
Material Development Centre (1982). A guide to Job Analysis: A "How To" publication for Occupational Analysis. Materials Development Center.
May, D. (2000). (Ed.). <i>Transition and change in the lives of people with intellectual disabilities</i> . London: Jessica Keingsley Publishers.
Marr, J.N., & Roessler, R.T. (1994). Supervision and management: A guide to modifying work behavior. Fayetteville: The University of Arkansas Press.
Peterson, N.G., Mumford, M.D., Borman, W.C., Jeanneret, P.R., & Fleishman, E.A. (1999). An occupational information system for the 21 st Century: The development of the O*NET. Washington, D.C.: American Psychological Association.
Parker, R. M., & Schaller, J. L. (2003). Vocational Assessment. In E. M. Szymanski, & R. M. Parker (Eds.) <i>Work and disability: issues and strategies in career development and job placement</i> (pp.155-200). 2nd Ed. Austin, Texas, Pro-Ed.
Porter, L.W., Bigley, G.A., & Steers, R.M. (2003). <i>Motivation and work behavior</i> (7th Ed.). New York: McGraw-Hill.
Poon, M.Y.C., Siu, A.M.H., & Sin, Y.M. (2010). Outcome analysis of occupational therapy programme for persons with early psychosis. <i>Work</i> , <i>37</i> , 65-70.
Power, P. W. (2000). A guide to vocational assessment. 3 rd Ed. Austin, Texas: Pro- Ed.
Prien, E.P., Goodstein, L.D., Goodstein, J., &Gamble Jr., L.G. (2009). <i>A practical guide to job analysis</i> . San Francisco, CA: Pfeiffer.
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Schultz, I. Z., & Gatchel, R. J. (2016). <i>Handbook of return to work : From research to practice</i> . Springer.
Szymanski, E. M., & Parker, R. M. (2003). Work and Disability: Issues and strategies in career development and job placement.2 nd Ed. Austin, Texas: Pro-Ed.
Karen E. Wolffe 著; 王敏行, 賴淑華, 戴富嬌譯《身心障礙者生涯諮商: 給 實務工作者的教戰手冊》台北市:心理出版社股份有限公司, 2009。

Subject Code	RS537
Subject Title	Psychosocial Rehabilitation for People with Developmental Disabilities
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	 Understand the integrated nature of psychosocial intervention for people with developmental disabilities Explore and understand behavioral, cognitive-behavioral and social intervention strategies for people with developmental disabilities according to updated evidences Understand and apply the psychosocial interventions to individual care plan of people with developmental disabilities
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Understand the integrated nature of psychosocial intervention for people with developmental disabilities from a system theory's perspective. b. Understand and apply behavioral, cognitive-behavioral and social intervention strategies for people with developmental disabilities. c. Understand and apply psychosocial interventions to the individual care plan of people with developmental disabilities.
Subject Synopsis/ Indicative Syllabus	 Overview of psychosocial intervention Behavioral intervention General theories and principles Assessment and study for of challenging behavior Treatment of challenging behavior for people with ASD Positive behavioral support Cognitive-behavioral intervention Theories and principles Treatment for people with ADHD & DCD Social skills training Social intervention Therapeutic recreation Community participation Social intergration Caregiver issues
Teaching/Learning Methodology	Seminar is mainly used to deliver essential knowledge and key information. Practical will be used for demonstration and to enhance students to learn assessment and therapy skills. Seminar presentation in a group format will facilitate students to work collaboratively in a topic. Written assignment is used to demand students to work individually and in group to integrate theory and practical in a manuscript which should be reflected from the level of rigor. Independent study is used for students to find out and self-study required materials.

Assessment		1	1					
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	ed subj ed (Pleas	ect lear se tick as	ning ou appropria	tcomes ate)	to be
Intended Learning Outcomes			a	b	с			
	1.Written assignment	70	~	~	~			
	2. Presentation	30	~	~	~			
	Total	100%						
	Explanation of the approprintended learning outcomes	priateness of	the ass	sessmen	it meth	ods in	assess	ing the
Student Study	Class contact:						(39	Hrs.)
Effort Expected	 Seminar 	Seminar					33 Hrs.	
	Tutorials 6 H					Hrs.		
	Other student study effort:					(80 Hrs.)		
	 Self-study 						40	Hrs.
	 Peer group study 						10	Hrs.
	 Written assignment 						30	Hrs.
	Total student study effort						119	Hrs.
Reading List and References	Sarafina, E. P. (1996). <i>Principles of Behavior Change: Understanding behavior modification techniques</i> . New York: John Wiley & Sons, Inc.				ehavior			
	van der Vlugt, H., Pijnenburg, H. M., Wels, P. M. A., & Koning, A. (1995). Cognitive behavior modification of ADHD: A family system approach. In H. P. J. G. van Bilsen, P. C. Kendall, & Slavenburg, J. H. (Eds), <i>Behavioral approaches for</i> <i>children and adolescent: Challenges for the next century</i> . NY: Plenum Press.					(1995). P. J. G. hes for		
	Zarkowska, E., & Clements, J. (1994). Problem behavior and people with severe learning disabilities: The STAR Approach. London: Chapman & Hall.						severe	
	Journal: Journal of Applied Behavio Research in Developmental	ral Analysis Disabilities						

Subject Code	RS538
Subject Title	Psychometric Theories and Practice
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Recommended background knowledge: Basic concepts of inferential statistics including linear regression, correlation and ANOVAs.
Objectives	 To equip students with basic measurement theories requiring for conducting validation studies on summative instruments. To apply different qualitative and quantitative enquiry methods for collecting evidence on psychometric properties of clinical instruments. To evaluate the appropriateness and usefulness of common summative instruments used in clinical practices.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Evaluate relevance and representativeness of test content against theoretical constructs based on which the instrument is developed. b. Analyze characteristics of the instruments and evaluate the appropriateness of using specific method for gathering evidence on its reliability. c. Evaluate psychometric properties of summative instruments based on evidence generated from structural and substantive validity. d. Criticize strengths and weaknesses of validation studies of common summative instrument. e. Synthesize psychometric theories and design appropriate validation study on psychometric properties of clinical instruments.
Subject Synopsis/ Indicative Syllabus	 Inferential statistics: ANOVA and MANOVA, explorative and confirmatory factor analyses Criterion- and norm-referenced testing Level of measurement and its relationship with psychometric analyses Introduction to classical test theory Concepts of reliability, i.e. coefficients of consistency and stability; different estimation methods: Cronbach's alpha, intraclass correlation, kappa Classical model of validity - its history, Cronbach and Meehl, Loevinger, Anastasi, Nunnally – content, structural, substantive and construct Messick's model of validation and Rasch analysis Norming and scaling
Teaching/Learning Methodology	The teaching methods used are tutorial and laboratory. Students will be given research papers, in-class exercise and quizzes to facilitate learning of concepts and knowledge on psychometrics. Students will conduct statistical analyses on data sets for learning of quantitative analyses. The group presentation and assignments are valuable venue for consolidating the knowledge and skills learnt in classes.

Assessment		[
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	led subj ed (Pleas	ect lear e tick √ a	ning ou s appropria	tcomes ate)	to be			
Intended Learning Outcomes			а	b	с	d	e				
	1. Assignments (two)	80	~	~	~	~	~				
	2. Group presentation	20		~	~	~					
	Total	100%		•			•				
	In the group presentation, the students are required to evaluate the methods used and results obtained from published or non-published studies on specific clinical instruments. In the assignments, the students will generate evidence of psychometric properties of a clinical instrument based on a real data set and critically comment on strengths and weaknesses and suggest ways for further improving the instrument. Both assessment components are useful for consolidating the learning of the theories and concepts in class. The thinking and computation processes involved in the assignments will enrich the students' skills on designing validation studies in the future.										
Student Study	Class contact:					(33 Hrs.)					
Effort Expected	Tutorial						15 Hrs.				
	 Laboratory 	18 Hrs.									
	Other student study effort:						(92 Hrs.)				
	Self-study 68 Hrs.										
	 Preparation for assignments and group presentation 						24 Hrs.				
	Total student study effort						125	Hrs.			
Reading List and References	Anastasi, A., & Urbina, S. (1997). <i>Psychological Testing</i> (7th ed.). Upper Saddle Riv NJ: Simon & Schuster.					le River,					
	Benson, J., & Clark, F. (1 American Journal of Occupa	982). A guid ational Therap	e for in <i>v</i> , <i>36</i> (12	strumer 2), 789-8	nt devel 300.	opment	and va	lidation.			
	Chan, C. C. H., Lee, T. M. C., Fong, K. N. K., Lee, C., & Wong, V. (2002). Cognit profile for Chinese patient with stroke. <i>Brain Injury</i> , <i>16</i> (10), 873-884.						ognitive				
	Chang, W.C., & Chan, C.C.H. (1995). Rasch analysis for outcomes measures: Se methodological considerations. <i>Archives of Physical Medicine and Rehabilitation</i> , 934-939.						s: Some <i>tion</i> , 76,				
	Clark, L. A., & Watson, D. (1995). Constructing validity: Basic issues in obje development. <i>Psychological Assessment</i> , 7(3), 309-319.						n object	ive scale			
	Crocker, L., & Algina, J. (1986). <i>Introduction to Classical and Modern</i> Orlando, FL: Holt, Rinehart and Winston, Inc.						ern Test	Theory.			
	Cronbach, L. J. (1971). <i>Measurement</i> (2nd ed.). (Chron Education.	Test validati apter 14, pp. 4	on. Ir 43-507)	n R.L.). Wash	Thornd iington,	ike (Ed DC: Ai	l.), <i>Edu</i> merican	<i>cational</i> Council			
	Haynes, S. N., Richard, D	D. C. S., & I	Kubany	, E. S.	(1995)	. Con	tent va	lidity in			

psychological assessment: A functional approach to concepts and methods. <i>Psychological Assessment</i> , 7(3), 238-247.
Leung, A. W. S., Chan, C. C. H., & He, J. (2004). Structural stability and reliability of Swedish Occupational Fatigue Inventory (SOFI) among Chinese sedentary worker. <i>Applied Ergonomics</i> , <i>35</i> , 233-241.
Leung, S. O. C., Chan, C. C. H., & Shah, S. (2007). Development of Chinese version Modified Barthel Index – Validity and rehabilitation. <i>Clinical Rehabilitation</i> , <i>21</i> , 912- 922.
Messick, S. (1993). Validity. In R. L. Linn (Ed.), <i>Educational Measurement</i> (3rd ed.)(pp.13-103). Phoenix, AZ: Oryx Press.
Ottenbacher, K. J., & Tomchek, S. D. (1993). Reliability analysis in therapeutic research: Practice and procedures. <i>American Journal of Occupational Therapy</i> , 47(1), 10-16.
Nunnally, J. C., Bernstein, I. H. (1994). <i>Psychometric Theory</i> (3 rd ed.). New York: McGraw-Hill, Inc.
Portney, L. G., & Watkins, M. P. (2000). <i>Foundations of Clinical Research. Application to Practice</i> (2 nd Ed.). Upper Saddle River, NJ: Prentice-Hall, Inc.
Shrout, P. E., & Fleiss J. L. (1979). Intraclass correlations: Uses in assessing rater reliability. <i>Psychological Bulletin</i> , 86, 420-428.
Yu, M. S. W., Chan, C. C. H., Tsim, R. K. M., & (2007). Usefulness of Elderly Mobility Scale for residential placement considerations. <i>Clinical Rehabilitation</i> , <i>21</i> , 1114-1120.

Subject Code	RS554
Subject Title	Physical Diagnosis of Neuro-musculoskeletal Disorders
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	 Recommended background knowledge: 1. Knowledge in anatomy, physiology, pathology, kinematics and physiotherapeutic modalities equivalent to the level of a recognized bachelor degree in physiotherapy; 2. Clinical experience in physiotherapy management in orthopaedics and traumatology.
Objectives	Upon completion of this subject, students should be able to demonstrate the level of proficiency, confidence and independence in clinical reasoning and making accurate physical diagnosis of neuro-musculoskeletal disorders based on subjective and objective evaluation.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Integrate the process of medical screening for red flags, differentiate the concept of physical diagnosis from medical diagnosis of musculoskeletal disorders, b. Recognise the importance and interdependence of physical and medical diagnoses in treatment planning, c. Perform the clinical examination of the musculoskeletal disorders, with safety, and accuracy, d. Hypotheses physical diagnosis on findings obtained from the clinical examination, e. Extract and interpret examination findings with accuracy, and f. Determine the classification of the disorders and construct a specific treatment strategy which address the total needs of the patient.
Subject Synopsis/ Indicative Syllabus	 Concept of physical diagnosis accuracy and limitations of the medical diagnosis in spinal disorders, advantages of the physical diagnosis in treatment planning, the working relation between medical and physical diagnoses. Process of physical diagnosis data collection through communication in a clinical setting, physical skills in diagnosis including observation, postural analysis, active movement testing, neurological examination, neuro-dynamics testing and manual examination, interpretation of diagnostic data synthesising knowledge from the basic, medical and behavioural sciences with clinical reasoning. Recording of findings significance of the information obtained through the use of the body chart, planning sheet and movement diagram in diagnosis, notations and abbreviations.

Teaching/Learning Methodology	A problem-orientated approach with case studies is adopted to enhance the overall integration and consolidation of the theory and practice of physical diagnosis in musculoskeletal therapy. In practical sessions, an inquiry-based approach is used and students learn to actively apply theories into practice and the essential skills. DVDs are used to facilitate the application of examination techniques. A subject-specific website has been developed to allow students' access to teaching material and discussion of issues relating to the subject is encouraged via the 'Discussion Forum'. Frequently asked questions are also posted on the website for student reference								
Assessment Methods in Alignment with	Specific assessment % Intended sub methods/tasks weighting assessed (Ple				oject le ease ti	arning ck as aj	outcon ppropri	nes to b ate)	be
Intended Learning Outcomes			а	b	c	d	e	f	
	1. Literature review	20	\checkmark	\checkmark					
	2. Clinical reasoning written report	20	\checkmark	\checkmark		\checkmark	\checkmark		
	3. Practical tests**	60	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	
	Total	100 %				·	•		
	 ** Students must obtain an aggregate pass in this assessment element in order to complete the subject. Literature Review: This assessment aims to evaluate students' critical thinking and update knowledge of various physical diagnostic methods, emphasizing in evidence based practice theory. Clinical reasoning Report: This assessment aims to evaluate students' clinical reasoning, selection of evaluation and treatment choice and skills. Practical test: This assessment aims to evaluate students' skills in the clinical examination of the musculoskeletal disorders, with safety, and accuracy. 							ing and vidence clinical clinical	
Student Study Effort Expected	Class contact:						(39 Hrs.)		
Enort Expected	Tutorial						13 Hrs.		
	Seminar						4 Hrs.		
	Practical							22	Hrs.
	Other student study effort							(93]	Hrs.)
	• Seminar preparation							15	Hrs.
	 Clinical reasoning report writing Reading/Self-practice 							15	Hrs.
								30	Hrs.
	 Skill practice 							33	Hrs
	Total student study effort					132 Hrs.			

Reading List and References	Aronoff GM (1999) Evaluation and Treatment of Chronic Pain. 3 rd Dd. Baltimore: Williams and Wilkins.
	Boissonnault WG (2011) Primary Care for the Physical Therapist: Examination and Triage. 2 nd Ed. St Louis: Saunders.
	Butler DS (2000) The Sensitive Nervous System. Adelaide: Noigroup Publications.
	Cyriax JH, Cyriax PJ (1993) Cyriax's Illustrated Manual of Orthopaedic Medicine. 2 nd Ed. Oxford: Butterworth-Heinemann.
	Fernández-de-las-Peñas C, Cleland JA, Dommerholt J (2016) Manual Therapy for Musculoskeletal Pain Syndromes: An Evidence and Clinical-informed Approach.
	Giles LGF (2003) 50 Challenging Spinal Pain Syndrome Cases. Butterworth Heinemann.
	Goodman CC, Snyder TK (2013) Differential Diagnosis for Physical Therapists: Screening for Referral. Elsevier.
	Greenhalgh S, Selfe J (2006) Red Flags: A Guide to Identifying Serious Pathology of the Spine. Edinburgh: Churchill Livingstone.
	Hengeveld E, Banks K (2014) Maitland's Peripheral Manipulation. 5 th Ed. Edinburgh: Churchill Livingstone.
	Hengeveld E, Banks K (2014) Maitland's Vertebral Manipulation. 8 th Ed. Edinburgh: Churchill Livingstone.
	Higgs J, Jones MA, Loftus S, Christensen N (2018) Clinical Reasoning in the Health Professions. 4 th Ed. Elsevier.
	Jayson MIV (1992) Lumbar Spine and Back Pain. 4 th Ed. Edinburgh: Churchill Livingstone.
	Jones MA, Rivett DA (2019) Clinical Reasoning for Musculoskeletal Practice. Elsevier.
	Jull G, Moore A, Falla D, Lewis J, McCarthy C, Sterling M (2015) Grieve's Modern Musculoskeletal Physiotherapy. 4 th Ed. Edinburgh: Churchill Livingstone.
	Lee DG (2011) The Pelvic Girdle: An Integration of Clinical Expertise and Research. 4 th Ed. Edinburgh: Churchill Livingstone.
	Magee DJ (2013). Orthopedic Physical Assessment. 6th ed. Philadelphia: Saunders.
	Maitland GD (1986) Musculo-Skeletal Examination and Recording Guide. 4 th Ed. Glen Osmond: Lauderdale.
	Olson KA (2016) Manual Physical Therapy of the Spine. 2 nd Ed. Elsevier.
	Sahrmann S and Associates (2011) Movement System Impairment Syndromes of the Extremities, Cervical and Thoracic Spines. Elsevier: Mosby.
	Shacklock M (2005) Clinical Neurodynamics: A new system of musculoskeletal treatment. Elsevier. Butterworth Heinemann.
	Stetts DM, Carpenter JG (2014) Physical Therapy Management of patients with Spinal Pain: An Evidence-Based Approach. SLACK Incorporated.
	Relevant texts and articles from relevant sources.

Subject Code	RS555
Subject Title	Advanced Principle and Practice of Manipulative Physiotherapy (Lower Quarter)
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Pre-requisite: RS554 Physical Diagnosis of Neuro-musculoskeletal Disorders
Objectives	The objective of this subject is to provide students with theories, skills and clinical application for manipulative physiotherapy practice. This subject focuses on developing competencies of physiotherapy professional practice in the areas of clinical reasoning and treatment selection of musculoskeletal dysfunction for lower thoracic spine, lumbar spine and lower limbs.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Adopt a holistic approach in implementing an effective treatment strategy specific to the disorder in the lower quarter and in regards to the total needs of the patient. b. Perform manipulative techniques in order to implement treatment with maximum degrees of safety, effectiveness, efficiency and ethics. c. Evaluate the results of treatment accurately, propose modifications and progression of treatment in response to perceived changes in the clinical picture. d. Communicate effectively with physiotherapists, medical and allied health professionals in the treatment strategy and overall management and prevention of disorder. e. Discuss the goals of treatment, prognosis, risks, management strategy and preventive care with patients and their relatives. f. Adopt the principles and practice of Chinese manipulative therapy into a cohesive treatment strategies in manipulative physiotherapy.
Subject Synopsis/ Indicative Syllabus	 Principle of treatment using manipulative techniques in the lower quarter clinical reasoning process in assessment and diagnosis, treatment selection and rationales indications, contra-indications, precautions and risks in the use of manipulative techniques treatment of pain, stiffness and/or spasm arising from articular disorders use of combined movements and neuro-dynamics techniques in treatment integrated use of active and passive movements Assessment and reassessment different types of assessment diagnosis of treatment outcomes diagnosis of treatment soreness and its limitation expectation and prognosis of treatment result Passive and active manipulative techniques rhythmic mobilisation techniques of the lower quarter high velocity thrusting techniques of the lower quarter concepts of muscle dysfunction, use of active mobilising, strengthening, stabilising and endurance exercises in the overall treatment strategy

	immobilisation, post-tran therapy, use of supports a	immobilisation, post-trauma, manipulation under general anaesthesia, injection therapy, use of supports and post-surgery							
	 5. Preventive care role of exercise life styles and fitness ergonomic adaptation 								
	 6. Chinese manipulative therapy philosophies and approaches in Chinese manipulative therapy scientific bases of Chinese manipulative therapy diagnosis and treatment skills 								
Teaching/Learning Methodology	A problem-orientated approach with case studies is adopted to enhance the overall integration and consolidation of the theory and practice of manipulative physiotherapy. Principles and concepts are introduced in lectures and subsequently reinforced through tutorials and clinical reasoning forum. Seminars help to identify and critically appraise the evidence underlying the rationale and practice of different treatment techniques. In practical sessions, an inquiry-based approach is used and students learn to actively apply theories into practice and the treatment skills.								
Assessment									
Methods in Alignment with Intended Learning	Specific assessment methods/tasks	% Intended subject lear weighting assessed (Please tick as			ning outcomes to be appropriate)				
Outcomes			а	b	с	d	e	f	
	1. Written test	40	~	~	~	~	~		
	2. Practical test*	40	~	~	~	~	~	~	
	3. Seminar presentation	20	~		~		~	~	
	Total	100%							
	* Students must obtain an complete the subject.	aggregate pa	ass in 1	this ass	essmer	nt eleme	ent in o	order to	
	 Written test is used to evaluate the student's clinical reasoning and understanding of the principle and practice of manipulative physiotherapy. Practical tests are used to evaluate the manipulative techniques and clinical skills competence. Seminar presentation aims to assess students' ability to critically appraise the up- to-date evidence underlying the rationale and practice of different manipulative techniques. 						standing al skills the up- pulative		
Student Study	Class contact:						(61	Hrs)	
Effort Expected	 Seminar/Tutorial 						26	Hrs.	
	 Practical 						35	Hrs.	
	Other student study effort:						(74	Hrs)	
	 Self-study/self practice 						59	Hrs.	
	 Preparation of seminar p 	resentation					15	Hrs.	
	Total student study effort					135 Hrs.			

Reading List and	Butler DS (2000) The Sensitive Nervous System. Adelaide: Noi group Publications.					
Keterences	Fernández-de-las-Peñas C, Cleland JA, Dommerholt J (2016) Manual Therapy for Musculoskeletal Pain Syndromes: An Evidence and Clinical-informed Approach.					
	Hengeveld E, Banks K (2014) Maitland's Peripheral Manipulation. 5 th Ed. Edinburgh: Churchill Livingstone.					
	Hengeveld E, Banks K (2014) Maitland's Vertebral Manipulation. 8 th Ed. Edinburgh: Churchill Livingstone.					
	Higgs J, Jones MA, Loftus S, Christensen N (2018) Clinical Reasoning in the Health Professions. 4 th ed. Amsterdam: Butterworth-Heinemann.					
	Hing W, Hall T, Rivett D, Vicenzino B, Mulligan B (2015) The Mulligan Concept of Manual Therapy: Textbook of Techniques. Elsevier.					
	Hodges PW, Cholewicki J, van Dieën JH (2013) Spinal Control: The Rehabilitation of Back Pain. Edinburgh: Churchill Livingstone.					
	Jones MA, Rivett DA (2019) Clinical Reasoning for Musculoskeletal Practice. Elsevier.					
	Jull G, Moore A, Falla D, Lewis J, McCarthy C, Sterling M (2015) Grieve's Modern Musculoskeletal Physiotherapy. 4 th Ed. Edinburgh: Churchill Livingstone.					
	Lee DG (2011) The Pelvic Girdle: An Integration of Clinical Expertise and Research. 4 th Ed. Edinburgh: Churchill Livingstone.					
	Petty NJ (2011) Neuromusculoskeletal Examination and Assessment: A Handbook for Therapists. 4 th Ed. Edinburgh: Churchill Livingstone.					
	Petty NJ (2011) Principles of Neuromusculoskeletal Treatment and Management: A Handbook for Therapists. 2 nd Ed. Edinburgh: Churchill Livingstone.					
	Richardson C, Hodges PW, Hides J (2004) Therapeutic Exercise for Lumbopelvic Stabilization: A Motor Control Approach for the Treatment and Prevention of Low Back Pain. 2 nd Ed. Edinburgh: Churchill Livingstone.					
	Shacklock M (2005) Clinical Neurodynamics: A new system of musculoskeletal treatment. Elsevier. Butterworth Heinemann.					
	Stetts DM, Carpenter JG (2014) Physical Therapy Management of patients with Spinal Pain: An Evidence-Based Approach. SLACK Incorporated.					
	龍層花(2007)脊椎病因治療學:紀念版.香港:商務印書館.					
	Relevant texts and articles from relevant sources.					

Subject Code	RS556
Subject Title	Advanced Principle and Practice of Manipulative Physiotherapy (Upper Quarter)
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Pre-requisite: RS554 Physical Diagnosis of Neuro-musculoskeletal Disorders
Objectives	The objective of this subject is to provide students with theories, skills and clinical application for manipulative physiotherapy practice. This subject focuses on developing competencies of physiotherapy professional practice in the areas of clinical reasoning and treatment selection of musculoskeletal dysfunction for cervical spine, upper thoracic spine and upper limbs.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Adopt a holistic approach in implementing an effective treatment strategy specific to the disorder in the upper quarter and in regards to the total needs of the patient. b. Perform manipulative techniques in order to implement treatment with maximum degrees of safety, effectiveness, efficiency and ethics. c. Evaluate the results of treatment accurately, propose modifications and progression of treatment in response to perceived changes in the clinical picture. d. Communicate effectively with physiotherapists, medical and allied health professionals in the treatment strategy and overall management and prevention of disorder. e. Discuss the goals of treatment, prognosis, risks, management strategy and preventive care with patients and their relatives. f. Adopt the principles and practice of Chinese manipulative therapy into a cohesive treatment strategies in manipulative physiotherapy.
Subject Synopsis/ Indicative Syllabus	 Principle of treatment using manipulative techniques in the upper quarter clinical reasoning process in assessment and diagnosis, treatment selection and rationales treatment of pain, stiffness and/or spasm arising from articular disorders use of combined movements and neuro-dynamics techniques in treatment integrated use of active and passive movements Passive and active manipulative techniques rhythmic mobilisation techniques of the upper quarter high velocity thrusting techniques of the upper quarter concepts of muscle dysfunction, use of active mobilising, strengthening, stabilising and endurance exercises in the overall treatment strategy Co-ordination with medical and health care personnel in situations such as immobilisation, post-trauma, manipulation under general anaesthesia, injection therapy, use of supports and post-surgery Preventive care role of exercise life styles and fitness ergonomic adaptation

Teaching/Learning Methodology	 5. Chinese manipulative therapy philosophies and approaches in Chinese manipulative therapy scientific bases of Chinese manipulative therapy diagnosis and treatment skills A problem-orientated approach with case studies is adopted to enhance the overall integration and consolidation of the theory and practice of manipulative physiotherapy. Principles and concepts are introduced in lectures and subsequently reinforced through tutorials and clinical reasoning forum. Seminars help to identify and critically appraise the evidence underlying the rationale and practice of different treatment techniques. In practical sessions, an inquiry-based approach is used and students learn to actively 								
Assessment Methods in Alignment with	apply theories into practice and the treatment skills. Specific assessment % methods/tasks weighting Intended subject learning outcomes to be assessed (Please tick as appropriate)								
Intended Learning			а	b	с	d	e	f	
Outcomes	1. Written test	40	\checkmark	\checkmark	~	~	~		
	2. Practical test*	40	~	~	\checkmark	~	~	\checkmark	
	3. Seminar presentation	20	✓		✓		✓	✓	
	Total 100% * Students must obtain an aggregate pass in this assessment element in order to complete the subject.								
	 Written test is used to evaluate the student's clinical reasoning and understanding of the principle and practice of manipulative physiotherapy. Practical tests are used to evaluate the manipulative techniques and clinical skills competence. Seminar presentation aims to assess students' ability to critically appraise the up- to-date evidence underlying the rationale and practice of different manipulative techniques. 								
Student Study	Class contact:						(61 Hrs)		
Enort Expected	 Seminar/Tutorial 						20) Hrs.	
	Practical						41	Hrs.	
	Other student study effort:						(74	Hrs)	
	 Self-study/self practice 						59	Hrs.	
	Preparation of seminar p	resentation					15	Hrs.	
	Total student study effort						135	Hrs.	

Reading List and References	Bogduk N, McGuirk B (2006) Management of Acute and Chronic Neck Pain: An Evidence-Based Approach. Elsevier.					
	Butler DS (2000) The Sensitive Nervous System. Adelaide: Noigroup Publications.					
	Fernández-de-las-Peñas C, Cleland JA, Dommerholt J (2016) Manual Therapy for Musculoskeletal Pain Syndromes: An Evidence and Clinical-informed Approach.					
	Hengeveld E, Banks K (2014) Maitland's Peripheral Manipulation. 5 th Ed. Edinburgh: Churchill Livingstone.					
	Hengeveld E, Banks K (2014) Maitland's Vertebral Manipulation. 8 th Ed. Edinburgh: Churchill Livingstone.					
	Higgs J, Jones MA, Loftus S, Christensen N (2008) Clinical Reasoning in the Health Professions. 3 rd Ed. Amsterdam: Butterworth-Heinemann.					
	Hing W, Hall T, Rivett D, Vicenzino B, Mulligan B (2015) The Mulligan Concept of Manual Therapy: Textbook of Techniques. Elsevier.					
	Jones MA, Rivett DA (2019) Clinical Reasoning for Musculoskeletal Practice. Elsevier.					
	Jull G, Moore A, Falla D, Lewis J, McCarthy C, Sterling M (2015) Grieve's Modern Musculoskeletal Physiotherapy. 4 th Ed. Edinburgh: Churchill Livingstone.					
	Jull G, Sterling M, Falla D, Treleaven J, O'Leary S (2008) Whiplash, Headache, and Neck Pain: Research-Based Directions for Physical Therapies. Edinburgh: Churchill Livingstone.					
	Petty NJ (2011) Neuromusculoskeletal Examination and Assessment: A Handbook for Therapists. 4 th Ed. Edinburgh: Churchill Livingstone.					
	Petty NJ (2011) Principles of Neuromusculoskeletal Treatment and Management: A Handbook for Therapists. 2 nd Ed. Edinburgh: Churchill Livingstone.					
	Shacklock M (2005) Clinical Neurodynamics: A new system of musculoskeletal treatment. Elsevier. Butterworth Heinemann.					
	Stetts DM, Carpenter JG (2014) Physical Therapy Management of patients with Spinal Pain: An Evidence-Based Approach. SLACK Incorporated.					
	龍層花(2007)脊椎病因治療學:紀念版.香港:商務印書館.					
	Relevant texts and articles from relevant sources.					

Subject Code	RS576								
Subject Title	Integrated Sports Science an	d Medicine							
Credit Value	3	3							
Level	5								
Pre-requisite / Co-requisite/ Exclusion	Nil								
Objectives	This subject adopts an integrative approach on sports science and sports medicine so as to provide to the students a holistic view on exercise and sports. Through didactic lectures from external experts, practical classes and seminar presentations, students are expected to develop an advanced understanding to the different aspects of sports science and sports medicine pertinent to their clinical work.								
Intended Learning Outcomes	 Upon completion of the subj a. Learn the scientific basi b. Appreciate the roles of c c. Learn the holistic bodily d. Understand the predisport e. Integrate the knowledge athletes. 	 Upon completion of the subject, students will be able to: a. Learn the scientific basis of sports physiotherapy and exercises. b. Appreciate the roles of each supporting team member in training for the athletes. c. Learn the holistic bodily needs of athletes during training and competitions. d. Understand the predisposing factors leading to sports injury. e. Integrate the knowledge in sports sciences for injury prevention and treatment of athletes. 							
Subject Synopsis/ Indicative Syllabus	 Exercise physiology. Nutrition and doping control. Sports psychology. Tissue biology and repair. Muscle strength and adaptation. Musculoskeletal trauma. Principles of conditioning. 								
Teaching/Learning Methodology	This subject will involve le expected to do substantial s classes.	ectures, labora self-learning th	atories an rough lit	id studer terature i	nt semina review an	ars. Stu nd presen	dents are ntation at		
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						es to be e		
Outcomes	1. Laboratory report	40	~		~	~			
	2. Written assignment	40	~	~	~	~	~		
	3. Oral presentation	20		~		~	~		
	Total	100%							
	Explanation of the approp intended learning outcomes:	oriateness of	the asses	ssment 1	methods	in asse	ssing the		

Student Study	Class contact:	(42 Hrs.)				
Effort Expected	Seminar/Tutorial	36 Hrs.				
	Laboratories					
	Other student study effort:					
	 Self study 	40 Hrs.				
	Preparation for lab report and seminar	40 Hrs.				
	Total student study effort	122 Hrs.				
Reading List and References	Kolt G, Snyder-Mackler L (2007) <i>Physical Therapies in Sport and Exercise</i> . 2 nd Edition. Edinburgh: Churchill Livingstone Elsevier.					
	 McArdle WD, Katch FI, Katch VL (2009) Exercise Physiology, Energy, Nutrition a Human Performance 6th ed. Baltimore: Williams & Wilkins. Nordin M, Frankel VH (2001) Basic Biomechanics of the Musculoskeletal System 3 ed. Philadelphia: Lippincott Williams & Wilkins. 					
	Relevant texts and articles from relevant sources.					

Subject Code	RS580
Subject Title	Theory and Practice of Sports Physiotherapy
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	This subject is not available to students who do not hold a recognized physiotherapy qualification.
Objectives	This subject aims to provide students the current knowledge in the prevention, assessment, treatment and rehabilitation of sports injuries.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Critically analyze the causes and mechanism of sports-related injuries. b. Identify the modifiable risk factors and effectively plan the intervention strategies. c. Critically evaluate the effectiveness of the intervention strategies. d. Apply principles of sports injury prevention and acute care of injured athlete. e. Apply the latest trends in the treatment and rehabilitation of sports injuries.
Subject Synopsis/ Indicative Syllabus	 Principles of Sports Injury Epidemiology of sports injuries – international and local scenario Risk factors associated with sports injuries Evidence based evaluation of prevention strategies in injury prevention Healing process of soft tissue injuries Principles of Sports Injury Prevention and acute care of injured athlete Pre-season fitness testing and equipment screening. Use of sports equipment and protective devices Principles of sports taping Sports injury assessment Emergency care of injured athlete and on-field physiotherapy coverage Principles of acute phase management Rehabilitation of sports injuries Treatment and rehabilitation rationale including conservative and surgical approaches Applied sports psychology Sports taping in rehabilitation Soft tissue release and stretching Functional sports specific rehabilitation Sports specific assessment and specific tests Principles of safe return to competition
Teaching/Learning Methodology	An interactive teaching and learning approach is the principle teaching methodology. Students are encouraged to relate the subject materials into their clinical practice and to challenge treatment and rehabilitation approach from evidence based perspective.

Assessment											
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intende assessee	d subject d (Please ti	learning ck ✓ as ap	outcome propriate)	s to be				
Intended Learning Outcomes			а	b	с	d	e				
	1. Seminar presentation	35	✓	~	✓	✓	~				
	2. Written assignment	35	\checkmark	\checkmark	\checkmark	\checkmark	✓				
	3. Practical test	30	✓	\checkmark	✓	✓	✓				
	Total	Total 100%									
	Seminar presentation - This independently review a par medicine, to critically review and express that in an organiz	assessment ai rticular topic and analyze ed manner.	ms to pr related the infor	ovide an to sport mation i	ovide an opportunity for students to to sports physiotherapy or sports mation in the literature, and present						
	Written assignment – This a present and provide evidence manner.	ssessment air e in their rev	ns to pro view topi	ovide an c in a w	opportun ell struct	ity for st tured and	udents to l succinct				
	Practical tests – This assess skills and application of the cases. Each student will be questioned on certain aspect skills. The student will the relating to the case.	ssessment component aims to evaluate the student's clinical f the knowledge to the management of acute sports injuries be given a clinical on field case scenario and he/she will be spects of the case which demand efficient clinical reasoning then be required to perform a selection of practical skills									
Student Study	Class contact:					(3	9 Hrs.)				
Effort Expected	 Tutorials 					1	l2 Hrs.				
	 Laboratory 					1	2 Hrs.				
	 Seminar 						6 Hrs.				
	Practical						9 Hrs.				
	Other student study effort:					(9	0 Hrs.)				
	 Seminar preparation 					2	20 Hrs.				
	 Assignment and report 					3	35 Hrs.				
	 Reading/self study 					3	35 Hrs.				
	Total student study effort					12	29 Hrs.				
Reading List and References	Required Texts: Brukner P. Khan K. (2009) <i>Clinical sports medicine</i> Sydney: McGraw-Hill										
	Recommended Reading: Magee DJ. et al. (2011) <i>Athl</i> Louis, Mo. : Elsevier/Saunde	<i>etic and spor</i> rs	ort issues in musculoskeletal rehabilitation. St.								
	Hewetson T. et al. (2010) A practice. Edinburgh: Mosby/	<i>n illustrated</i> Elsevier.	guide to	taping t	echnique	s : princ	iples and				
	Any relevant texts on Sports	Medicine and	l Sports F	hysiothe	rapy						
	Relevant texts and articles fro	m relevant so	urces.								
Subject Code	RS581										
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Subject Title	Advanced Practice and Clinical Integration in Sports Physiotherapy										
Credit Value	3										
Level	5										
Pre-requisite / Co-requisite/ Exclusion	This subject is not available to students who do not hold a recognized physiotherapy qualification.										
Objectives	This subject aims to provide students comprehensive knowledge and hands-on training in the assessment, treatment and rehabilitation of sports injuries at an advanced level.										
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Apply an evidence based approach to evaluate the effectiveness of sports rehabilitation protocol available in the literature. b. Develop advanced clinical reasoning skills in the management of sports-related injuries. c. Develop advanced practical skills in the management of sports-related injuries. 										
Subject Synopsis/ Indicative Syllabus	 Sports physiotherapy of the lower limb Physiotherapeutic management of sport-related lower limb injuries Radiological imaging in sports-related lower limb injuries Sports physiotherapy of the spine Physiotherapeutic management of sport-related spinal injuries Radiological imaging in sports-related spinal injuries Sports physiotherapy of the upper limb Physiotherapeutic management of sport-related upper limb injuries Radiological imaging in sports-related upper limb injuries Sports specific injury prevention and rehabilitation Injury prevention and rehabilitation for Track and Field Injury prevention and rehabilitation for swimming Injury prevention and rehabilitation for swimming Injury prevention and rehabilitation for ball games 										
Teaching/Learning Methodology	An interactive teaching and learning approach is the principle teaching methodology. Students are encouraged to relate the subject materials into their clinical practice and to challenge treatment and rehabilitation approach from evidence based perspective.										

Assessment Methods in	Specific assessment	%	Intend	ed subj	ect lear	ning ou	tcomes	to be
Alignment with	methods/tasks	weighting	assess	ed (Pleas	se tick √	as approp	priate)	
Outcomes			а	b	с			
	1. Seminar presentation	25	~	~	~			
	2. Written assignment	25	~	~	\checkmark			
	3. Practical test	50	~	~	\checkmark			
	Total	100%						
	Seminar presentation - This independently review a par medicine, to critically review and express that in an organiz Written assignment – This a present and provide evidence manner. Practical tests – Clinical co component aims to evaluate of the best evidence based p injuries. Each student will questioned on certain aspects integration skills. The studen skills relating to the case.	assessment ai rticular topic y and analyze zed manner. assessment ain we in their rev ompetence is the student's ractice in ma be given a s of the case y at will then b	ent aims to provide an opportunity for students to copic related to sports physiotherapy or spor- ulyze the information in the literature, and presen- ner. In aims to provide an opportunity for students to ir review topic in a well structured and succine we is key issue component of this subject. The ent's clinical skills and integration in the deliver in management and rehabilitation of sports related on a clinical case scenario and he/she will be ase which demand efficient clinical reasoning ar ien be required to perform a selection of practic					
Student Study	Class contact:						(39	Hrs.)
Effort Expected	 Tutorials 						21	l Hrs.
	 Seminar 	eminar 6 Hrs.						6 Hrs.
	 Practical 						12	2 Hrs.
	Other student study effort:						(90	Hrs.)
	 Seminar preparation 						20) Hrs.
	 Assignment and report 						35	5 Hrs.
	 Reading/self study 						35	5 Hrs.
	Total student study effort						129	9 Hrs.
Reading List and References	Required Texts: Brukner P. Khan K. (2009) Clinical sports medicine Sydney: McGraw-Hill Recommended Reading: Magae DL et al. (2011). Athlatic and sport insues in superclashelated schedulity of the sport insues.							<i>ution</i> . St.
	Louis, Mo. : Elsevier/Saunde Hewetson T. et al. (2010) A	ers In illustrated	ted guide to taping techniques : principles and					
	<i>practice</i> . Edinburgh : Mosby	/Elsevier.	Crant-	Dhara	thorse			
	Relevant texts and articles fro	om relevant so	urces.	r 11y S10	шегару			

Subject Code	RS587
Subject Title	Complementary and Alternative Therapies
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	The subject is designed to provide students with more advanced and evidence-based knowledge and practical skills on complementary and alternative therapist that allied health professions may apply in their clinical settings. Studying this subject will equip students to be more capable in reviewng literature, discerning evidence base of different CAM, and offering occupational therapy and other allied health services in different settings.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Understand the nature of psychosocial stress, its neurobiology, and its implications for working with people with disabilities. b. Understand the background and theories of complementary and alternative therapies. c. Understand the concepts and master basic skills on selected complementary and alternative therapies. d. Realize possible applications to people with physical and psychiatric disabilities. e. Critically review complementary and alternative therapies from a scientific and research point of view.
Subject Synopsis/ Indicative Syllabus	 Review of psychosocial stress, its neurobiology and its management Background and theories of complementary and alternative therapies Concepts and techniques of Abdominal breathing Progressive muscle relaxation Mind-body exercises such as Qigong, Yoga, and Tai Chi Meditation Acupressure Therapeutic massage Aromatherapy Applications to rehabilitation
Teaching/Learning Methodology	Lectures will be delivered to cover the theoretical background and concept of complementary and alternative therapies. Tutorials are for demonstration and practice of skills in treatment and documentation of outcomes. Practical sessions will facilitate students to become more competent in future clinical practice by applying skills learned.

Assessment Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend	led subj ed (Pleas	ject learning outcomes to be ase tick ✓ as appropriate)					
Intended Learning Outcomes			a	b	с	d	e			
	1. Presentation	40	~	~	~					
	2. Written assignment	60				~	~			
	Total	100%		ı	L					
	Explanation of the appropri learning outcomes:	ateness of the	assessn	nent me	thods ir	1 assess	ing the	intended		
Student Study	Class contact:						(36	Hrs.)		
Effort Expected	• Lecture						1	5 Hrs.		
	 Tutorial 						1	2 Hrs.		
	Practical							9 Hrs.		
	Other student study effort:						(70) Hrs.)		
	 Self-directed study 						7	0 Hrs.		
	Total student study effort						10	6 Hrs.		
Reading List and References	American Occupational Th care settings: a manual.	erapy Associ	ation (1	.987). (Dccupat	tional ti	herapy	in acute		
	Andrew, V. (1996). <i>Massa</i> London: Chapman & Hall.	age and aron	atherap	oy: a g	uide fo	r health	h profe	essionals.		
	Beck, M.F. (2010). Theo. Cengage Learning.	ry & Practic	e of T	Therapei	utic Ma	assage.	United	1 States:		
	Eknath, E. (1991). <i>Meditat</i> <i>ideals into daily life</i> .Tomale	<i>ion: a simple</i> es, Calif.: Nilg	<i>eight-p</i> iri Press	oint pro 5.	ogram f	for tran.	slating	spiritual		
	Freeman, L. (2009). <i>Mosby</i> <i>Based Approach</i> . 3 rd Edition	's <i>Compleme</i> n, Mosby, Else	ntary an evier.	nd Alter	native	Medicir	ne: A R	esearch-		
	Horrigan, C. et al. (1997). <i>control : using the Fleming</i>	<i>Relaxation for method</i> . Oxfo	r <i>concel</i> rd: Butt	n <i>tration</i> erworth	, <i>stress</i> -Heiner	<i>manag</i> mann.	ement	and pain		
	Proto, L. (1991). Meditation	n for everybod	y. Lond	on: Pen	guin Bo	ooks.				
	Smith, M, (1993). Stress. Lo	ondon: Kyle C	athie.							
	Tsang, H. W. H., Mok, C. H Qigong on general and psyc randomized clinical trial. <i>In</i>	K., Au Yeung, chosocial heal ternational Jo	Y. T., o th of elo <i>urnal o</i>	& Chan lerly wi f Geriat	, S. Y. (th chron <i>ric Psyc</i>	C. (200. nic phys chiatry,	3). The sical ill <i>18,</i> 441	effect of nesses: a -449.		
	Wilson, S.D. (1997). Qi Go.	ng for Beginne	ers. Ruc	lra Pres	s.					

Subject Code	RS588
Subject Title	Theories and Practice of Counseling for Rehabilitation and Health Professionals
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	This subject aims to enable students to attain update knowledge on counseling theories, and critically evaluate their application and evidence in use with persons with chronic health conditions, disabilities, and mental illness. Students are guided to practice and develop basic interviewing, counseling, and guiding skills to assist patients or persons with disabilities to adjust to their illness, develop self-management skills, and guide them to practice healthy lifestyle.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Critically appraise the application of key theoretical approaches in health and rehabilitation counselling. b. Critically review research evidence of counselling practice for persons with chronic illness and disabilities. c. Demonstrate key interviewing, counselling, guiding skills used in health care and rehabilitation practice. d. Reflect on one's own counselling style and practice in view of personal values, beliefs, self-concept, and strengths. e. Practice according to ethical principles.
Subject Synopsis/ Indicative Syllabus	 Counseling Theories Psychosocial adjustment to disability and illness Self-efficacy and Self-management in illness management Behavioural: Dialectical Behaviour Therapy (DPT), Cognitive-behavioural Therapy (CBT). Humanistic-experiential: Person-centred Therapy, Emotion-Focused Therapy Motivational Interviewing Family: Family systems therapy, Satir Model Counseling Practice Counselling for persons with chronic health conditions, disabilities, mental illness, and substance abuse. Chinese culture and counseling practice Ethical issues in counselling practice Case formulation and documentation Evidence-based practice in counselling Counselling Skills Counselling skills (active listening, interviewing, action planning, challenging, handling resistance) Challenging and Influencing skills Informing & Guiding skills

Teaching/Learning Methodology	During seminars, the lectures will give short lectures on counselling theories and approaches. This is closely followed by tutorials in which group discussions and experiential activities are used to further consolidate learning. During practical sessions, the lecturer will instruct and coach students to practice counseling skills using demonstration, role plays, and feedback sessions. The seminars are student-led in which students present their review and critical review of specific counseling approaches.								
Assessment Methods in Alignment with	Specific assessment methods/tasks	% Intended s weighting assessed (1			ect lear e tick ✓ a	ct learning outcomes to be tick ✓ as appropriate)			
Intended Learning Outcomes			а	b	с	d	e		
	1. Quiz	30	~	~	~	~	~		
	2. Seminar presentation	30	~	~					
	3. Counselling skill assessment	40			~	~	~		
	Total	100%		1	1				
	The seminar presentation is a group project in which students study, review, and present a critique of a specific counseling approach, including its philosophy, values, therapeutic principles, practice skills, and evidence. The seminar requires students to appraise theories & evidence-based practice of approaches, and provide a platform for intellectual exchange. Lecturer will assess the counselling skills of students during practice and role play assessment. Students are required to submit reflective journals of one's own counselling skills and style.								
Student Study	Class contact:						(39	Hrs.)	
Effort Expected	Seminar						1	8 Hrs	
	Tutorial						9 Hrs		
	 Practical 						12 Hrs		
	Other student study effort:						(70	Hrs.)	
	 Self-study 						3	60 Hrs	
	 Preparation of Seminar 						1	0 Hrs	
	 Self-practice 						1	0 Hrs	
	 Preparation of assignme 	ents					2	20 Hrs	
	Total student study effort						10	9 Hrs	
Reading List and References	Key Readings Bitter, J. R., & Corey, G. (<i>practice of counseling and p</i> Brodsky, B. S., & Stanley, F	2016). Family sychotherapy 3. (2013). The	y syster (10 th ec	ns ther d). USA	apy. In .: Ceng ehavior	G. Cor age. • Therap	rey. The	eory and ner: How	

DBT can inform clinical practice (pp.205-219). John Wiley & Sons.
Cameron, S., & Turtle-Song, I. (2002). Learning to write case notes using the SOAP format. <i>Journal of Counseling & Development</i> , 80(3), 286-292.
Chan, F., Berven, N. L., & Thomas, K. R. (Eds.) (2004). <i>Counseling theories and techniques for rehabilitation health professionals</i> . New York: Springer. Chapters 4, 7-9.
Corey, G. (2012). Student Manual for Corey's Theory and Practice of Counseling and Psychotherapy. (9th Ed). Belmont, CA: Cengage Learning.
Corey, G. (2012). <i>Theory and Practice of Counseling and Psychotherapy. (9th Ed)</i> . Belmont, CA: Cengage Learning. Chapters 3,7,9,10,14.
Ivey, A.E., Ivey, M.B. (2007). Intentional interviewing & counselling: Facilitating client development in a multicultural society. 6 th Ed. Belmont, CA: Thomson/Brooks/Cole Publishing.
Leahy, R. L. (2003). <i>Cognitive therapy techniques: A practitioner's guide</i> . New York: The Guildford Press.
Leahy, R. L., & Holland, S. J. (2000). <i>Treatment plans and interventions for depression and anxiety disorders</i> . New York: Guildford Press.
Marini, I., Glover-Graf, N. M., & Millington, M.J. (2012). <i>Psychosocial aspects of disability: insider perspectives and counselling strategies</i> . NY: Springer Publishing Co. Chapters 5,6.
Moos, R.H., & Holahan, C.J. (2007). Adaptive tasks and methods of coping with illness and disability. In Martz, E., Livneh, H. (Eds.). <i>Coping with chronic illness and disability: Theoretical, empirical, and clinical aspects (pp.107 – 128).</i> New York: Springer Pub. Co.
Powell, T. (2009). <i>The mental health handbook: A cognitive-behavioural approach (3rd Ed.)</i> . Milton Keynes, UK: Speechmark Publishing Ltd.
Rollnick, S., Miller, W. R., & Butler, C. C. (2008). <i>Motivational interviewing in health care: helping patients change behavior</i> . New York: The Guildford Press.
See, J., & Kamnetz, B. (2004). Person-Centered counseling in rehabilitation professions. In F. Chan, N. L. Berven, & K. R. Thomas, K. R. (Eds). <i>Counseling theories and techniques for rehabilitation health professionals</i> (pp.76-96). New York, USA: Springer Publishing Co.
Spradlin, S.E. (2003). Don't let your emotions run your life: How dialectical behaviour therapy can put you in control. CA: New Harbinger Publications.
Wagner, C. C., & McMahon, B. T. (2004). Motivational interviewing and rehabilitation counseling practice. <i>Rehabilitation Counseling Bulletin</i> , 47(3), 152-161.

Subject Code	RS593
Subject Title	Sensory and Motor Intervention for People with Developmental Disabilities
Credit Value	3
Level	5
Pre-requisite/ Co-requisite/ Exclusion	Recommended background knowledge: At least one year experience in working with people with developmental disabilities prior to applying for this subject.
Objectives	The overall aim is to provide the student with the opportunity to integrate scientific knowledge and research evidence into their clinical practice. The focus is to achieve an understanding of the theoretical frameworks and perspectives in relation to research and clinical practice, to encourage hypothesis testing in the clinical setting and to critically analyse the relevant literature. The theme is 'using scientific evidence to improve clinical practice'.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Interpret theories of sensori-motor development, learning and control in relation to the development of children and adults with developmental disabilities and demonstrate an understanding of the research methodologies. b. Integrate knowledge of standardized measures of development, their purpose, and psychometric properties to select, implement and interpret an appropriate measure for specific populations, settings and objectives. c. Apply clinical reasoning skill in design of intervention program to enhance or maintain sensory and motor performance in people with developmental disabilities. d. Extract, critically analyze and apply information from relevant research articles in this subject area. e. Apply technologies to manage sensory and motor issues in people with developmental disabilities.
Subject Synopsis/ Indicative Syllabus	 Evidence-based approach to the following: Theories of motor development, motor learning, skill acquisition, motor control and sensory integration. Management approaches in school, home and clinical setting. Critically review and administer standardized instruments. Clinical reasoning in applying sensory and motor intervention for people with developmental disabilities. Advances in technology and adaptive equipment.
Teaching/Learning Methodology	Self-directed learning approach will be applied. Learning activities include case study, critical review of article, test critique, and management critique. Through seminars, the theoretical framework and contemporary issues in the assessment and management of key challenges in people with developmental disabilities will be discussed based on recent literatures. Experts in the field will share clinical experiences, recent research findings and insights into management of sensory and motor issues of people with developmental disabilities will be guided to design intervention program of selected area for people with developmental disabilities.

Assessment Methods in	Specific assessment methods/tasks	sment % Intended subject learnin weighting assessed (Please tick ✓ a					ng outcomes to be as appropriate)		
Alignment with Intended Learning		00	a	b	с	d	e		
Outcomes	1. Test Critique	30	✓	✓		✓			
	2. Intervention program design	70	✓		✓	~	~		
	Total	100%							
	 Test critique – aim at developing knowledge and skills in critiquing assessment using on one domain of sensory or motor function, by comparing and contrasting two or more tests that are relevant to people with developmental disabilities. Critical thinking will be required. The students will be required to submit a report. Intervention program design – aims at facilitating students to integrate knowledge and clinical reasoning skills in design intervention program to enhance or maintain sensory and motor performance in people with developmental disabilities. Application of theories, critical appraisal of research findings, clinical reasoning skill and innovations will be required. Student will select an area of intervention for people with developmental disabilities (e.g. developmental coordinator disorders, autism spectrum disorder, or attention-deficits/ hyperactivity disorder, etc.) for the intervention program design. The students will be required to present their developed intervention program at the seminar and submit a report. 								
Student Study	Class contact:					(39 Hrs.)			
Effort Expected	Seminar						39 Hrs.		
	Other student study effort:						(70 Hrs.)		
	Self-study						40 Hrs.		
	Seminar presentation & report preparation					30 Hrs.			
	Total student study effort					109 Hrs.			
Reading List and References	Isbell, C., & Ebrary, Inc. skills your child needs for	(2010). Ever r school. Silve	yday play r Spring,	y fun gam MD: Gryj	es to dev phon Hou	elop the t	fine motor		
	Kramer, P., & Hinogosa, J. (2010). Frames of reference for pediatric occupational therapy. Baltimore, MD: Lippincott Williams & Wilkins.								
	Kurtz, L. (2008). Under autism, and other learni essentials). London; Phil	rstanding mot ing disabilitie adelphia: Jess	or skills es: A gui ica Kings	in childr ide to im ley.	en with proving	dyspraxia, ADHD, g coordination (JKP			
	Lai, C.Y.Y., & Chiu, A.S.M. (2018). Sensory processing and self-regulation checklist (Second ed.). Hong Kong: Heep Hong Society.								
	Panteliadis, C. (2018). Cham, Switzerland: Sprin	Cerebral pals nger.	y: A mu	ıltidiscipli	nary app	proach (T	Third ed.).		
	Robertson, L., & Ebrary, Inc. (2012). Clinical reasoning in occupational therapy controversies in practice. Chichester; Ames, Iowa: Wiley-Blackwell.								
	Schaaf, R., & Mailloux, Z. (2015). Clinician's guide for implementing Ayres Sensory Integration: Promoting participation for children with autism. Bethesda, MD: AOTA Press, The American Occupational Therapy Association.								

Shumway-Cook, A., & Woollacott, M. (2017). Motor control: Translating research into clinical practice (Fifth ed.). Philadelphia: Wolters Kluwer.
Siu, A.M.H., Lai, C.Y.Y., Chiu, A.S.M., & Yip, K.C.K. (2011). Development and validation of a fine-motor assessment tool for use with young children in a Chinese population. Research in Developmental Disabilities, 32(1), 107-114.
Webster, J., & Murphy, D. (2018). Atlas of orthoses and assistive devices (Fifth ed.). Philadelphia, PA: Elsevier.

Subject Code	RS594
Subject Title	Recent advances in rehabilitation for people with developmental disabilities
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Recommended background knowledge: At least one year experience in working with people with developmental disabilities prior to applying for this subject.
Objectives	To integrate scientific knowledge and research evidence into the recent advances and clinical practice in the rehabilitation for people with developmental disabilities.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Interpret various theories of development, learning and meta-cognition in relation to rehabilitation management of people with developmental disabilities; b. Demonstrate an understanding of the research methodologies in developmental disabilities rehabilitation; c. Integrate knowledge of standardized measures of function, their purpose, and psychometric properties to select, implement and interpret an appropriate measure for specific client groups, populations, settings and objectives; d. Extract, critically analyse and apply information from relevant research articles in this subject area; and e. Analyze selected treatment and/or technologies to developmental disabilities rehabilitation.
Subject Synopsis/ Indicative Syllabus	 Evidence-based approach to the following: 1. Theories of development, learning and meta-cognition. 2. Current development in developmental disabilities rehabilitation, e.g. sensory- based intervention, TEACCH, social story, computerized training, and IT training. 3. Critically review and analyze standardized instruments. 4. Rehabilitation management of populations such as specific learning difficulties, autism, developmental coordination disorder, attention deficit hyperactivity disorder, and intellectual disability. 5. Sexuality and relationships in adults with intellectual disabilities 6. Pre-vocational and vocational training. 7. Advances in technology and adaptive equipment. 8. Discussion of selected research articles throughout.
Teaching/Learning Methodology	Lectures and seminar/tutorial will cover the knowledge in the theories and recent advances in the field. In seminars sessions, students will discuss the selected research articles in assessment and treatment issues. Students are encouraged to do self- readings in the area to enhance their understanding in the seminar discussion.

Assessment								
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	ed subj ed (Pleas	ect lear e tick √ as	ning ou s appropria	tcomes ate)	to be
Intended Learning Outcomes			а	b	с	d	e	
	1. Report	70	✓	✓	~	~	~	
	2. Oral presentation	30		√	~	~	~	
	Total	100%			L		1	
	Written Report (70%) – ach of written work plan and submission for publication t	nieve intended written repor o internationa	l learnin t with l rehabi	ng outco the fina litation	omes #a al outco -related	a-e thro ome in journa	ugh cor the for l.	npletion rm of a
	Oral presentation (30%) presentation of selected jour	- achieve in rnal papers in a	ntended assessm	learni ent and	ing ou l treatm	tcomes ent issu	#b-e les.	through
Student Study	Class contact:						(39	Hrs.)
Effort Expected	 Seminar/tutorial 						33	Hrs.
	 Guided study 					6 Hrs.		
	Other student study effort:					(90 Hrs.)		
	 Reading 					30 Hrs.		
	Preparation for written	assignment					30) Hrs.
	 Preparation of topic dis 	cussion, semin	nar				30) Hrs.
	Total student study effort						129	Hrs.
Reading List and References	Bennett, S. J., Holmes, J., & Buckley, S. (2013). Computerized memory training leads to sustained improvement in visuospatial short-term memory skills in children with Down Syndrome. American journal on intellectual and developmental disabilities, 118, 179-192.						training hildren omental	
	Bronson, M. B. (2000). Sel York, NY: Guildford.	If-regulation i	n early	childho	od: Na	iture an	d nutur	e. New
	Erez, G & Peled, I. (2001). Cognition and metacognition: Evidence of higher thinking in problem-solving of adolescents with mental retardation. <i>Education & Training in</i> <i>Mental Retardation & Developmental Disabilities, 36</i> , 83-93. Fegan, L. & Rauch, A. (1993). <i>Sexuality and people with intellectual disability</i> . Baltimore, MD: Paul H. Brookes Publishing Co.						hinking ning in sability.	
	O'Callaghan, A.C. & Mun intellectual disabilities: Ur <i>Research</i> , 51, 197-206.	rphy, G.H. (2 nderstanding t	2007). S the law	Sexual . <i>Journ</i>	relation nal of 1	nships Intellec	in adul tual Di	ts with sability
	Liu, K.P.Y., Chan, C.C.H. Case Reports on Self-regul Injury. <i>Brain Injury, 16,</i> 817	, Lee, T.M.C atory Learnin 7-824.	., Li, L g and (.S.W. General	& Hui- ization	Chan, (for Peo	C.W.Y. ople wit	(2002). th Brain

Liu, K.P.Y., Lee, T., Yan, A., Siu, C.W.M., Choy, F.W.Y., Leung, K.L.K., Siu, T.Y.
& Kwan, A.C.S. (2007). Use of Interact Short Form as a Tool to Evaluate Emotion of
People with Profound Intellectual Disabilities. Journal of Intellectual Disability
Research, 51, 884-891.
Li-Tsang, C.W.P., Yeung, S.S.S., Choi, J.C.Y., Chan, C.C.H., Lam, C.S. (2006). The
effect of systematic information and communication technology (ICT) training
programme for people with intellectual disabilities. British Journal of Developmental
Disabilities, 52, 3-18.
McConkey, R. & Ryan, D. (2001). Experiences of staff in dealing with client sexuality
in services for teenagers and adults with intellectual disability. Journal of Intellectual
Disability Research, 45, 83-87.
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Subject Code	RS595 & RS596
Subject Title	Independent Study I & II
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Nil
Objectives	To provide an opportunity to the student to pursue an interested area of study, or an area that has strong relevance to the student's clinical work or an area the student feel that needs more in depth study, which usually is not available in regular course offerings.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Deepen the understanding of the knowledge of a particular area of study. b. Evaluate the methods of which the knowledge was created and validated. c. Critically review the evidence-based practice formulated in the area of study. d. Disseminate the knowledge and evidence-based practice to peers.
Subject Synopsis/ Indicative Syllabus	There is no syllabus for the independent study. The student may choose an area in rehabilitation science and/or practice which is of interest. The student is to consult the supervisor to decide on the area and formulate objectives of study which can be completed within three months. The chosen area may or may not be related to the project study/thesis which the student undertakes in the master/doctoral programme. The study begins with setting objectives for guiding the learning activities. By end of the study, the student is required to evaluate his/her attainment against these objectives. The self-evaluation may include the relevance of the nature and format of the learning (such as tutorials, literature search etc); the time spent on each activity; the extent which the knowledge is gained (scope and depth); and contribution of the knowledge gained to study in the programme. The knowledge gained and/or critical review of evidence-based practice in the study is to be written in the form of a report. The content of the report should reflect synthesis and evaluation of the knowledge.
Teaching/Learning Methodology	Student's self-directed study is the main learning method used in this subject. Besides, the student is to participate in individual and/or small group tutorial with the supervisor. The learning objectives are mutually agreed by the student and supervisor which set the scope of the study. The learning is further consolidated by the written report and oral presentation by the student.

Assessment Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	ed subj ed (Pleas	ning ou s appropria	tcomes ate)	to be			
Outcomes			а	b	с	d				
	1. Report	80	~	\checkmark	√					
	2. Seminar presentation	20		\checkmark	\checkmark	\checkmark				
	Total	100%								
	The report requires the student to write about what is learnt in the reduction of the supervisor. Such processes involve summarizing reviewing and reflecting which is the most appropriate for self-directed led presentation is for the student to articulate what is learnt and share the with the peers. Similarly, this is an appropriate method for disseminational knowledge gained.							ing and critical ng. The rmation of the		
Student Study	Class contact:						(13 Hrs.)			
Effort Expected	 Individual tutorial with supervisor 							10 Hrs.		
	Seminar Presentation							3 Hrs.		
	Other student study effort: • Extensive literature review					(90 Hrs.)				
						60 Hrs.				
	 Preparation of the report 	and presentat	tion				30 Hrs.			
	Total student study effort						103	Hrs.		
Reading List and References	Akerlind GS, Trevitt AC (1999). Enhancing self-directed learning through educationa technology. <i>Innovations in Education and Training International</i> , 36(2):96-105.					cational				
	 Garrison DR (1997). Self-directed learning: Toward a comprehensive model. Adu. Education Quarterly, 48(1):18-33. Savicevic DM (1999). Adult Education: From Practice to Theory Building. Studies in Pedagogy, Andragogy, and Gerontagogy. New York: P. Lang. 						1. Adult			
							udies in			
	Su Y-H (2011). Lifelong 1 Education Quarterly, 61:57-	Y-H (2011). Lifelong learning as being: The Heideggerian perspective. A lucation Quarterly, 61:57-72.						e. Adult		

Subject Code	RS598							
Subject Title	Clinical Practice I in Sports	Physiotherap	у					
Credit Value	3							
Level	5							
Pre-requisite / Co-requisite/ Exclusion	Pre-requisite: RS580 Theory and Practice RS581 Advanced Practice a This subject is not availabl qualification.	Pre-requisite: RS580 Theory and Practice of Sports Physiotherapy RS581 Advanced Practice and Clinical Integration in Sports Physiotherapy This subject is not available to students who do not hold a recognized physiotherapy qualification.						
Objectives	To provide an opportunity knowledge with the applica	o provide an opportunity for students in sports physiotherapy to integrate the content nowledge with the application of skills in practical settings.						
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Acquire clinical reasoning skills in decision making. b. Evaluate and implement on-field management and comprehensive rehabilitation program for recreational and elite athletes. c. Provide health information talks, and injury prevention talks to selected sports. 							
Subject Synopsis/ Indicative Syllabus	 On-field physiotherapy Clinical practicum in space 	 On-field physiotherapy placement Clinical practicum in sport rehabilitation clinics 						
Teaching/Learning Methodology	 Clinical attachment Case-based tutorial During clinical attachment, principles and concepts are taught through guided learning with demonstration and practice. Throughout, students are guided to identify and critically appraise the evidence underlying the rationale and practice of different treatment techniques, drawing from recent articles in various fields (e.g., epidemiology, images). Students also integrate this knowledge to develop methods to educate athletes on / injury properties. 							
Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks % weighting Intended subject learning outcomes assessed (Please tick ✓ as appropriate) a b c				to be			
	1.Written assignment	20	✓	v				
	2.Patient management	60	~	~				
	3.Case presentation	20		✓	✓			
	Total	100%						
	Students' clinical reasonin whole practicum based on presentation evaluates stu problems, provide an appro	tudents' clinical reasoning and management skill are being evaluated during the hole practicum based on case-based written assignment and patient contact. Case resentation evaluates students' ability to analysis relevant information, identify roblems, provide an appropriate treatment plan.				tring the ct. Case identify		

Student Study Effort Expected	Class contact:	(72 Hrs.)			
	On-field practicum	24 Hrs.			
	Clinical practicum	48 Hrs.			
	Other student study effort:	(48 Hrs.)			
	 Self reading 	24 Hrs.			
	 Preparation of assignment 	24 Hrs.			
	Total student study effort	120 Hrs.			
Reading List and References	is subject provides opportunity for students to integrate their knowledge acquired in egrated Sports Science & Medicine, Sports Physiotherapy I and II into clinical actice. The indicative reading list and references from these three subjects are commended for this subject.				

Subject Code	RS599
Subject Title	Clinical Practice II in Sports Physiotherapy
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Pre-requisite: RS598 Clinical Practice I in Sports Physiotherapy This subject is not available to students who do not hold a recognized physiotherapy qualification.
Objectives	The focus with the Clinical Practice II is to provide the opportunity for students in sports physiotherapy to integrate the content knowledge and application of skills in practical settings of professional sport teams. Given the complexity and unique opportunity to observe the training of specific sport event, students will have better understanding to the injury mechanism and apply appropriate rehabilitation techniques or/and injury prevention strategies.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Identify the risk factors of injury and illness associated with participation in competitive athletics, and be able to plan and implement all components of a comprehensive athletic injury and illness prevention program. b. Conduct an on-field initial clinical evaluation of injuries and illnesses commonly sustained by the competitive athletes. c. Provide appropriate first aid and emergency care for acute athletic injuries and illnesses according to accepted standards and refer injured and ill athletes to appropriate medical/paramedical personnel for evaluation and diagnosis and follow-up care. d. Plan and implement a comprehensive rehabilitation and reconditioning program for injuries and illnesses sustained by the competitive athletes. e. Have the opportunities to provide counseling to athletes and/or coaches on matters pertaining to the physical, psychological, and emotional health of the athletes. f. Have the opportunities to practice the profession of sports physiotherapy and work in a team with other health care professionals including physicians, chinese manual therapists, sports psychologists, sports nutritionists, nurses, and exercise physiologists.
Subject Synopsis/ Indicative Syllabus	The clinical placement will include attachment to professional sports teams where students will practice under the guidance of faculty members. The clinical experience includes observation of athletes training and practice for different sports, discussion with coaches, and provision of sports physiotherapy services to the athletes at the Sports Medicine Hospital of the National Sports Training Center, China. Students will integrate the knowledge and skills acquired in Integrated Sports Science & Medicine, Sports Physiotherapy I and II into clinical practice.
Teaching/Learning Methodology	This is a clinical placement which demands students application of clinical skills in the management of the injured athletes. Clinical supervision will be conducted by well experienced Sports physiotherapists/team physicians.

Assessment		1	1						
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	led subj ed (Pleas	ect learn se tick ✓	ning out as approp	tcomes r priate)	to be	
Intended Learning Outcomes			a	b	с	d	e	f	
	1. Ongoing clinical assessment	50	~	~	√	~	~	~	
	2. Case report presentation	50	~	~	~	~	~	~	
	Total	100%							
	Ongoing clinical assessme feedback on the students' of athletes, and effectiveness in Case report presentation – the case that the student h students' knowledge in the he used in the planning reconditioning program for	int - This asso clinical compo- in the interaction The case repo- as managed i sports that he and implement the case that	essment etence i ion with ort aims n the cl /she cho enting t he/she h	atms to n the de the wh s to test linical p osen, the he com- nas chos	o provi elivery ole spor the ath placeme e evider prehens	de stud of physi rts medi letes' u nt, to c nce-base sive reh	ents con iotherap icine tea ndersta halleng ed appro nabilitat	ntinuous by to the um. nding of e on the bach that ion and	
Student Study	Class contact (72 hrs in a 2	(72 Hrs.)							
Effort Expected	 Tutorials 		12 Hrs.						
	 Clinical attachment and 		60 Hrs.						
	Other student study effort:	udent study effort:					(60 Hrs.)		
	 Case study preparation 	and presenta	tion			35 Hrs.			
	 Reading/self study 						25 Hrs.		
	Total student study effort						132	2 Hrs.	
Reading List and References	Required Texts: Brukner P. Khan K. (2009) Clinical sports medicine Sydney: McGraw-Hill								
	Recommended Reading: Magee DJ. et al. (2011) <i>Athletic and sport issues in musculoskeletal rehabilitation.</i> St Louis, Mo. : Elsevier/Saunders					<i>ution</i> . St.			
	Hewetson T. et al. (2010) <i>practice</i> . Edinburgh : Most	An illustrated by/Elsevier.	l guide	to tapir	ıg techi	niques :	princij	ples and	
	Any relevant texts on Sport	ts Medicine ar	nd Sport	ts Physi	otherap	У			
	Relevant texts and articles f	rom relevant s	ources.						

Subject Code	RS5200							
Subject Title	Advanced Occupational T	Therapy Study	/					
Credit Value	3							
Level	5							
Pre-requisite/ Co-requisite/ Exclusion	Exclusion: Students who do not hold	Exclusion: Students who do not hold a recognized qualification in occupational therapy						
Objectives	To apply theoretical concepts of occupational therapy in emerging fields and to synthesize advanced practice knowledge in a chosen area of practice							
Intended Learning Outcomes	 Upon completion of the state a. Critically review propagers on evidence-base b. Analyse theoretical or relevance and application chosen area of study. c. Critically discuss the practice in the chosen d. Develop proficient le reasoning, reflective proficient proficient proficient proficient processories 	 Upon completion of the subject, students will be able to: a. Critically review professional occupational therapy knowledge and scientific papers on evidence-based practice in the chosen area of study. b. Analyse theoretical concepts and evidence for an in-depth discussion on the relevance and application to the current occupational therapy practice in the chosen area of study. c. Critically discuss the development and advancement of occupational therapy practice in the chosen area of study. d. Develop proficient level of professional competencies by acquiring professional reasoning, reflective practice and self-directed learning. 						
Subject Synopsis/ Indicative Syllabus	 Current development of occupational therapy theories Emerging practice in local, regional and internationally levels Proficient level of professional competencies Synthesis of advanced knowledge using evidence, professional reasoning and theoretical concepts in a selected area of practice 							
Teaching/Learning Methodology	Related concepts are grouped together and presented in a series of lectures, seminars, and online resources. Learning is reinforced using seminar presentations that require the students to analyze the theoretical constructs of advanced practice. Students will work in groups or individually with a supervisor to synthesize advanced practice using evidence, professional reasoning and theoretical concepts in a selected area of practice. Clinical visits may be arranged by the supervisors to facilitate learning.							
Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks Seminar presentation	% weighting 40	Intended assessed a 	subject b √	learning c √	outcome d √	s to be e 	
Outcomes	Written assignment	60	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	
	Total	100 %		1		1		
	<u>Seminar presentation</u> Each student will identify a theoretical concept in occupational therapy practice critically review the literature and analyze the conceptual relationship between theory and practice in a selected area of practice.				practice, en theory			

	<u>Written assignment</u> Each student will use evidence, professional reasoning and th analyze a selected area of practice.	neoretical concepts to			
Student Study	Class contact:	(36 Hrs.)			
Effort Expected	Tutorial	6 Hrs.			
	Seminar	12 Hrs.			
	Guided study/visit	18 Hrs.			
	Other student study effort:	(100 Hrs.)			
	Self-directed learning	50 Hrs.			
	Prepare presentation and assignment	50 Hrs.			
	Total student study effort	<u>136 Hrs.</u>			
Reading List and	References:				
Kelerences	 Canadian Association of Occupational Therapists (2007). Profile of occupational therapy practice in Canada (2007). Ottawa, ON: CAOT Publications ACE Cole, M. B., & Tufano, R. (2008). Applied theories in occupational therapy: a practical approach. Thorofare, NJ: SLACK Inc. Crepeau, E. B., Cohn, E. S., & Schell, B. A. B. (2009). Willard & Spackman's occupational therapy (11th ed.). Philadelphia, PA: Lippincott Williams & Wilkins. 				
	Curtin, M. Molineux, M. & J. Supyk-Mellson, J. (2010), Occupational thera physical dysfunction: enabling occupation (sixth ed.). Edinburgh: Cl Livingstone/Elsevier.				
	Duncan, E. A. S. (2008). Skills for practice in occupational therapy. Edinburgh York: Elsevier.				
	Hinojosa, J., & Kramer, P. (2010). Frames of reference for p therapy (Vol. 3). Baltimore, Md.: Lippincott Williams & Wilkins	pediatric occupational s.			
	Kielhofner, G. (2009). Conceptual foundations of occupational ed.). Philadelphia: F.A. Davis Co.	therapy practice (4th			
	Schell, B. A. B., & Schell, J. W. (2008). Clinical and prof occupational therapy. Philadelphia: Wolters Kluwer Health/L: Wilkins.	essional reasoning in ippincott Williams &			
	Sladyk, K. Jacobs, K. & MacRae, N. (2010), Occupational clinical competence. Thorofare, NJ: SLACK Inc.	therapy essentials for			

Subject Code	RS5201
Subject Title	Current Development in Neurological Rehabilitation
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Practicing occupational therapist
Objectives	The overall aim of this subject is to provide the student with the opportunity to integrate scientific knowledge and research evidence into their clinical practice. The focus will be on understanding theoretical frameworks and perspectives in relation to research and clinical practice, to encourage hypothesis testing in the clinical setting, to critically analyse the relevant literature and to put evidence based information into clinical practice. The theme is 'using scientific evidence to improve clinical practice'.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Interpret various theories of motor learning, neuroplasticity, active learning and control in relation to neurological rehabilitation; b. Demonstrate an understanding of the research methodologies in neurological rehabilitation; c. Integrate knowledge of standardized measures of function, their purpose, and psychometric properties to select, implement and interpret an appropriate measure for specific client groups, populations, settings and objectives; d. Evaluate relevant, evidence-based programs to enhance or maintain function; e. Critically analyse select treatment and/or technologies to neurological rehabilitation; and f. Extract, critically analyse and apply information from relevant research articles in this subject area.
Subject Synopsis/ Indicative Syllabus	 Evidence-based approach to the following: Theories of motor learning, neuroplasticity, active learning and control. Current development in neuro-rehabilitation, e.g. self-regulation, mental imagery, constraint-induced therapy, virtual reality. Critically review and administer standardized instruments. O.T. Management of special populations such as dementia, Parkinson's disease, CVA, brain injuries Community neuro-rehabilitation and fall prevention Advances in technology and adaptive equipment. Alternative approaches in neurological rehabilitation.
Teaching/Learning Methodology	Lectures and seminar will cover the knowledge in the theories and recent advances in the field. In guided study sessions, students will discuss the selected research articles in assessment and treatment issues. During practical, students will engage into the practicing selected techniques in the field. Students are encouraged to do self-readings in the area to enhance their understanding in the seminar discussion.

Assessment]				
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	ed subj ed (Plea	ect lear se tick ✓	ning ou as approj	tcomes priate)	to be				
Intended Learning Outcomes			а	b	c	d	e	f				
	1. Report	70	~	√	~	~	~	~				
	2. Oral presentation	30		\checkmark	~	~	~	~				
	Total	100%			1	1	1					
	 Portfolio Assessment A student-centred assessment: students will develop and justify their ow portfolio based on fulfilling the subject objectives. Lecturers will initia closely with students to clarify the objectives and expectations of the su of items that could be included in their portfolio include: a case study, c of an article, test critique, written assignment, web page, reflective journ A written report and an oral presentation will be developed based on this Written Report (70%) – achieve intended learning outcomes #a-f throw of written work plan and written report with the final outcome in 							elop and justify their own assessment es. Lecturers will initially work very ad expectations of the subject. Types include: a case study, critical review eb page, reflective journals etc. developed based on this work. ng outcomes #a-f through completion the final outcome in the form of a				
	Oral presentation (30%)- presentation of selected jour	- achieve in rnal papers in a	tended assessm	learnin ent and	ng out treatm	comes ent issu	#b-f es.	through				
Student Study	Class contact:						(39 Hrs.)					
Effort Expected	• Seminar						27 Hrs.					
	Practical Guided study						9 Hrs.					
							3 Hrs.					
	Other student study effort:						(90	Hrs.)				
	 Assignments and report 	ts					40	Hrs.				
	 Seminar preparation 						17	Hrs.				
	 Reading / self-study 						33	Hrs.				
	Total student study effort						129	Hrs.				
Reading List and References	 Cicerone, K.D., Dahlberg, C., Kalmar, K., et al. (2000). Evidence-based cognitive rehabilitation: Recommendations for clinical practice. <i>Archives of Physical Medicine & Rehabilitation</i>, <i>81</i>, 1596-1615. Frost, S.B., Barbay, S., Friel, K. M., Plautz, E. J., & Nudo, R. J. (2003). Reorganization of remote cortical regions after ischemic brain injury: A potential substrate for stroke recovery. Journal of Neurophysiology, 89, 3205-3214. Liu, K.P.Y., Chan, C.C.H., Wong, R.S.M., Kwan, I.W.L., Yau, C.S.F., Li, L.S.W., & Lee, T.M.C. (2009). A randomized controlled trial of mental imagery augment generalization of learning in acute poststroke patients. <i>Stroke</i>, 40 (6), 2222-2225. 						(2003). (2003)					
	Liu, K.P.Y., Chan, C.C.H., Chu, M.M.L., Ng, T.Y.L., Chu, L.W., Hui, S.L., Y H.K. & Fisher, A.G. (2007). Activities of Daily Living performance in dementia.						, Yuen, ia. <i>Acta</i>					

Neurologica Scandinavica, 116, 91-95.
Liu, K.P.Y., Chan, C.C.H., Lee, T.M.C. & Hui-Chan, C.W.Y. (2004a). Mental Imagery for Promoting Relearning for People After Stroke: A Randomized Controlled Trial. <i>Archives of Physical Medicine and Rehabilitation</i> , <i>85</i> , 1403-1408.
Liu, K. P. Y., Chan, C. C. H., Lee, T. M. C., & Hui-Chan, C. W. Y. (2004b). Mental imagery for relearning of people after brain injury. <i>Brain Injury</i> , 18(11), 1163-1172.
Liu, K.P.Y., Chan, C.C.H., Lee, T.M.C., Li, L.S.W. & Hui-Chan, C.W.Y. (2002). Case Reports on Self-regulatory Learning and Generalization for People with Brain Injury. <i>Brain Injury</i> , <i>16</i> , 817-824.
Losseff, N. (2004). Neurological rehabilitation of stroke. London: Taylor & Francis.
Murphy, M.A. & Roberts-Warrior, D. (2003) A Review of Motor Performance Measures and Treatment Interventions for Patients With Stroke. <i>Topics in Geriatric Rehabilitation</i> , 19 (1), 3-42.
Pierce, S.R. & Buxbaum, L.J. (2002). Treatment of unilateral neglect: A review. Archives of Physical Medicine & Rehabilitation, 83, 256-268.
Rijntes, M. & Weiller, C. (2002). Recovery of motor and language abilities after stroke: The contribution of functional imaging. Progress in Neurobiology, 66, 109-122.
Umphred, D.A. (2001). Neurological Rehabilitation (4th Ed). St. Louis: Mosby

Subject Code	RS5202
Subject Title	OT Management for Upper Extremity Participation in Neurological Conditions
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	This subject is not available to students who do not hold a recognized occupational therapy professional qualification Recommendation background knowledge: At least one year experience in working with people with hemiplegia prior to applying for this subject.
Objectives	 understand the recovery pattern of upper extremity for people with hemiplegia; understand and apply the updated assessments for upper extremity in neurological conditions; understand and apply the current OT management approaches for hemiplegic upper extremity; and understand the approach of Traditional Chinese Medicine (TCM) in upper extremity rehabilitation for OT
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Understand the theory underpinning hemiplegic upper extremity rehabilitation; b. Select and conduct common upper extremity assessments for clients with neurological conditions; c. Appreciate and apply evidence-based practice in upper extremity rehabilitation for clients with neurological conditions; d. Explore the approach of TCM in hemiplegic upper extremity rehabilitation.
Subject Synopsis/ Indicative Syllabus	 Neurological and functional recovery of upper extremity in people with hemiplegia Critical review of upper extremity evaluation for neurological conditions Current management for hemiplegic upper extremity TCM in hemiplegic upper extremity rehabilitation
Teaching/Learning Methodology	Seminar is mainly used to deliver essential knowledge and key information. Practical will be used for demonstration and to enhance students to learn assessment and therapy skills. Seminar presentation in a group format will facilitate students to work collaboratively in a topic. Written assignment is used to demand students to work individually and in group to integrate theory and practical in a manuscript which should be reflected from the level of rigor. Independent study is used for students to find out and self-study required materials.

Assessment		1	1					
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Intend assess	Intended subject lear assessed (Please tick as			tcomes ate)	to be
Intended Learning Outcomes			а	b	с	d		
	1.Written assignment	70	~	\checkmark	~	~		
	2. Presentation	30	~	\checkmark	\checkmark	~		
	Total	100%						
	Explanation of the appropriate o	priateness of :	the as	sessmer	nt meth	ods in	assess	ing the
Student Study	Class contact:						(39]	Hrs.)
Effort Expected	 Seminar 						12	Hrs.
	Practical						27	Hrs.
	Other student study effort:				(71)	Hrs.)		
	 Independent study/ e-le 	earning					12	Hrs.
	 Peer group study 						26	Hrs.
	• Written assignment						33	Hrs.
	Total student study effort						110	Hrs.
Reading List and References	Chan, D., Chow, K., Leun living training manual for neuro-developmental theor Coordinating Committee fo Fong, K., Ng, B., Chan, D. Chan, A., & Chan, V. (2 Functional Test for the H Journal of Occupational Th Gillen, G., & Burkhardt, A (2 nd Ed.). New York: Mosby Magill, R. A. (2004). Moto The McGraw-Hill Compani	g, S., Yuen, R <i>stroke: Appl</i> y. Hong Kon, r Occupationa , Chan, E., M. 2004). Develo lemiplegic Up <i>erapy</i> , 14, 21- . (2004). Strok y. <i>r learning and</i> tes, Inc.	 Activities of daily Application of motor relearning approach and Kong: Working group on stroke rehabilitation, ational Therapists, Hospital Authority. E., Ma, D., Au, B., Chiu, V. Chang, A., Wan, K., Development of the Hong Kong version of the gic Upper Extremity (FTHUE-HK). Hong Kong 4, 21-19. Stroke rehabilitation: A function-based approach ing and control: Concepts & applications (7th Ed.). 					
	Mesulam, M. M. (2000). Pr NY: Oxford University Pres Trew, M., & Everett, T.	rinciples of be ss. (1998). Huma	haviour an mov	al and ement	<i>cogniti</i> v (3 rd Ed	ve neuro .). Lon	ology (2 don: C	2 nd Ed.). hurchill
	Journals: American Journal of Occup Archives of Physical Medic	ational Therap ine and Rehab	y ilitation	L				

Clinical Rehabilitation Developmental Medicine and Child Neurology Hong Kong Journal of Occupational Therapy Human Movement Science Journal of NeuroEngineering and Rehabilitation Journal of Rehabilitation Medicine Neurorehabilitation and Neural Repair Pediatrics Stroke
Stroke

Subject Code	RS5203							
Subject Title	Case management of People	Case management of People with Developmental Disabilities						
Credit Value	3							
Level	5							
Pre-requisite / Co-requisite/ Exclusion	Recommended Background At least one year experience prior to applying for this su	Recommended Background Knowledge: At least one year experience in working with people with developmental disabilities prior to applying for this subject.						
Objectives	The overall aim of this sub student to pursue an area of work, or an area the student	The overall aim of this subject is to provide self-directed learning opportunity for the student to pursue an area of study that has strong relevance to the student's clinical work, or an area the student feel that needs more in-depth study.						
Intended Learning Outcomes	 Upon completion of the sub a. Expand the knowledge b. Consolidate the prof disabilities; c. Assess the relevance of d. Further pursue the topic 	 Jpon completion of the subject, students will be able to: a. Expand the knowledge of a particular diagnosis of developmental disabilities; b. Consolidate the professional knowledge in the field of developmental disabilities; c. Assess the relevance of learned materials for evidence-based clinical practice; d. Further pursue the topic independently. 						
Subject Synopsis/ Indicative Syllabus	The student is required to particular diagnosis of deve practice. This subject facil particular diagnosis of de extensive literature review.	The student is required to complete one case management of an individual with a particular diagnosis of developmental disabilities that is relevant to his or her clinical practice. This subject facilitates the student to have an in-depth understanding of a particular diagnosis of developmental disabilities through case management and extensive literature review.						
Teaching/Learning Methodology	A self-directed learning involves the student identifying one's goals and objectives, content of case management of an individual with a particular diagnosis of developmental disabilities and learning approach under the supervision of a faculty member as the academic mentor who is an expert in the subject area selected by the student.							
Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks	ssessment % Intended subject learning outcomes to be asks weighting assessed (Please tick \checkmark as appropriate)						
			a	b	c	d		
	1. Written assignment	70	\checkmark	\checkmark	\checkmark	\checkmark		
	2. Presentation	30	\checkmark	\checkmark	\checkmark	\checkmark		
	Total	100%						
	Written Report (70%) – achieve intended learning outcomes #a-d through completion of written assignment reporting on the work done with literature support. Oral presentation (30%) - achieve intended learning outcomes #a-d through presentation of the work done.							

Student Study	Class contact:	(39 Hrs.)			
Effort Expected	Seminar	9 Hrs.			
	Practical	9 Hrs.			
	Guided study	21 Hrs.			
	Other student study effort:	(90 Hrs.)			
	Self-study	30 Hrs.			
	Assignment preparation	30 Hrs.			
	Presentation preparation	30 Hrs.			
	Total student study effort	129 Hrs.			
Reading List and References	American Association on Mental Retardation (2002). (10th ed.). Mental retardation Definition, classification and systems of supports. Washington, D. C.: Author.				
	Carmeron, D. R. (1997). Self-directed learning: Towards a c Adult Education Quarterly, 48(1), 18-33.	comprehensive model.			
	Carr, E. G., Horner, R. H., Turnbull, A. P., McLaughlin, D. M., McAtee, M. L., Smith, C. E., Ryan, K. A., Ruef, M. D., Doolabh, A. (1999). <i>Positive behavior support for people with developmental disabilities: A research synthesis</i> . Washington, DC: American Association on Mental Retardation.				
	 Cohen, W. I., Nadel, L. & Madnick, M. E. (2002). (Eds.). Down syndrome: Vision the 21st century. New York : Wiley-Liss. Eddie, L. L. (2013). Caring for children with special healthcare needs and families: A handbook for healthcare professionals. Somerset, NJ: Wiley-Blackwell 				
	Hall, L. J. (2009). Autism spectrum disorders: From theory to practice. Upper Sade River, NJ: Merrill/Pearson.				
	 Holburn, S. & Vietze, P. M. (2002). (Eds). Person-centered planning: Research practice and future direction. Baltimore: Paul H. Brookes. Huebner, R. A. (2001). (Ed). Autism: A sensorimotor approach to management Gaithersburg: Aspen Publishers. 				
	Hunter-Carsch, M. & Herrington, M. (2001). (Eds.). <i>Dyslexia an secondary and tertiary education</i> . London : Whurr Publishers.	nd effective learning in			
	Gray, D. E. (1998). Autism and the family: Problems, prospects disorder. Springfield: Charles C. Thomas Publisher Ltd.	s, and coping with the			
	Jordon, D. R. (2002). (3 rd ed.). Overcoming dyslexia in child adults. Austin: Pro-Ed.	dren, adolescents and			
	Katirji, B. al et (2002) Neuromuscular disorder in clinical Heinemann.	practice. Butterworth			
	Kalyva, E. (2011). Autism: Educational and therapeutic appr	oaches. London, UK:			

Sage.
Li Eria P. Y. (2004). We have made it: Successful stories of people with Down syndrome. Hong Kong: The Hong Kong Down Syndrome Association.
Li, Eria P. Y. (2008). Ordinary miracles: Successful stories of people with disabilities. Hong Kong: Fu Hong Society.
May, D. (2000). (Ed.). <i>Transition and change in the lives of people with intellectual disabilities</i> . London: Jessica Kingsley Publishers.
Myles, B. S. & Simpson, R. L. (2003). (2 nd ed.). Asperger syndrome: A guide for parents and educators. Austin: Pro-Ed.
Orenstein, M. (2000). Smart but stuck: What every therapist needs to know about learning disabilities and imprisoned intelligence. New York: The Haworth Press.
Pentecost, D. (2000). Parenting the ADD child: Can't do? Won't do? London: Jessica Kingsley Publishers.
Pueschel, S. M. & Sustrova, M. (1997). (Eds.). Adolescents with Down syndrome: Toward a more fulfilling life. Baltimore: Paul H. Brookes.
Rief, S. F. (2005). How to reach and teach children with ADD/ADHD : <i>Practical techniques, strategies, and interventions</i> . San Francisco, CA: Jossey-Bass.
Rossi, P. A. (2003). <i>Case management in healthcare: A practical guide</i> . Philadelphia: W. B. Saunders.
Selikowitz, M. (2012). <i>Dyslexia and other learning difficulties</i> . UK: Oxford University Press.
Stanton, M. (2012). Understanding cerebral palsy: A guide for parents and professionals. London: Jessica Kingsley.
Stevens, S. H. (1996). The LD child and the ADHD child: Ways parents and professionals can help. NC: John E. Blair, Publisher.
Wong, B., & Butler, D. (Eds.) (2012). Learning about learning disabilities. London: Academic Press.
Zentall, S. S. (2006). ADHD and education. New Jersey, NY: Pearson Prentice Hall.

Subject Code	RS5210
Subject Title	Contemporary Issues in Exercise Science and Exercise Prescription
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Foundation knowledge of musculoskeletal physiotherapy equivalent to the level of a recognized physiotherapy undergraduate programme
Objectives	This subject aims to provide students a thorough knowledge and understanding in the current and contemporary issues in the science of exercise prescription and health promotion. Emphasis will be put on the evidence investigating the links between exercise and health, and the skills for the measurement and evaluation of health-related fitness and performance enhancement.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Demonstrate the competence in the use of appropriate instrument to assess physical activity and energy expenditure. b. Demonstrate the ability to use advanced techniques for the assessment and interpretation of health-related fitness and sports-related fitness. c. Apply the learned knowledge in exercise physiology to exercise program prescription for specified health and/or sport outcome effects. d. Apply the physiological principles of exercise to individuals representing different life stages as well as to individuals representing special populations. e. Acquire the principles of training and modification of training methods for different settings to address different needs, i.e., exercise for health promotion, for injury prevention or for performance enhancement. f. Effectively design, deliver and document group exercise programs to meet the health needs of special populations and setting e.g., exercise in the school, community and workplace settings. g. Synthesise and integrate evidence based practice in the scientific arena in sports functional training and rehabilitation. h. Critically evaluate the scientific bases of the current trends of exercise patterns in the health and fitness industries.
Subject Synopsis/ Indicative Syllabus	 Current issues in exercise and health Exercise and health: risk or benefit and the dose response relationship Exercise: physical fitness and health outcome measures Instrumentation for assessing physical activity and physical fitness measurement Physical activity and energy expenditure: subjective and objective recording Health related fitness measurement: parameters, reliability and validity Sports related fitness measurement: parameters, reliability and validity Recent advances in instruments: applicability and interpretation Scientific bases of exercise prescription Review of current guidelines and its scientific bases Scientific bases of exercise for cardiovascular health and fitness Scientific bases of exercise prescription for the special population Exercises and weight control Exercises for the female population

	 Physiological chan Exercises for Type Exercises in cardia Exercise and health pr Exercise in the sch Exercise in the con Exercise at the wor Evidence based praction Evaluation of current to (e.g. Yoga, Pilates) 	ges in aging a II DM c rehabilitation omotion in v ool muunity kplace ce in sports fut trends of exert	and its on arious unction rcise p	impli settin nal tra attern	g ining s in th	for ex and re e heal	kercise habilit th and	tation fitnes	ss ind	ustries
Teaching/Learning Methodology	An interactive teaching and learning approach is the principle teaching methodology. Students are encouraged to relate the subject materials into their clinical practice and to challenge treatment and rehabilitation approach from evidence based perspective.									
Assessment Methods in Alignment with Intended Learning	Specific assessment methods/tasks	% weighting	Inter asses	ided sissed (P	ubject lease tic	learni k √ as aj	ng out ppropria	tcome te)	s to b	e
Outcomes			а	b	c	d	e	f	g	h
	1. Lab report	30	~	~	✓	~	✓	~	~	~
	2. Exercise Training log book	30	~	~	~	~	~	~	~	~
	3. Seminar presentation and written assignment	40	~	~	~	~	~	~	~	~
	Total	100%								
Laboratory report – the laboratory report tested the students' knowledge in understanding of the commonly performed exercise physiology tests for the evaluat of an individual aerobic and anaerobic fitness. Students are required to perform tests in a reliable and valid manner, and interpret the findings with appropr literature support.					in the uation m the opriate					
	Exercise log book - stud science and exercise prese their own exercise training to evaluate on the effectiv learning-through-participat an active and healthy life s	ents acquire cription throug schedule and reness of the tion approach tyle.	and c ugh le d adho trainin n allov	consol arning ere to ng pro vs in-o	date g by p their t gram lepth	their articip rainin that th learnin	knowl pation. g sche hey ha ng and	edge Stud edule i ve pla l aims	in ex ents of for 6 anned to de	ercise decide weeks . This evelop
	Seminar presentation and opportunity for students to science and exercise prese the literature, and present to provide an opportunity topic in a well structured a	written assign independen cription, to cription, to cription, to cription and express for students to nd succinct n	gnmen tly rev riticall that in to pres nanner	t - Th view a y revi a an or sent ar	nis ass partic ew an rganiz nd pro	sessme cular to d anal ed ma vide e	ent air opic ro lyze th nner. videno	ns to elated ne info The v ce in t	provi to ex ormat vritter heir r	de an ercise ion in aims eview

Student Study	Class contact:	(39Hrs.)			
Effort Expected	Tutorials	18 Hrs.			
	Seminar	9 Hrs.			
	Laboratory	12 Hrs.			
	Other student study effort:	(90 Hrs.)			
	Seminar preparation	20 Hrs.			
	 Assignment and report 	35 Hrs.			
	 Reading/self study 	35 Hrs.			
	Total student study effort	129 Hrs.			
Reading List and References	Baechle TR. Earle RW (2000) Essentials of strength training and conditioning / National Strength and Conditioning Association. 2 nd edition, Champaign, Ill. : Human Kinetics				
	 Griffin JC. (2006). Client-centered exercise prescription. Champaign IL, Hu Kinetics. McArdle WD. Katch FI. Katch VL (2007) Exercise physiology : energy, nutrition, human performance 6th edition, Philadelphia : Lippincott Williams & Wilkins. Swain DP. Brian CL (2007) Exercise prescription : a case study approach to ACSM guidelines. 2nd edition, Champaign, IL. Human Kinetics 				
	Whaley MH. (2005) ACSM's Guidelines for exercise testing edition, Lippincott Williams & Wilkins	g and prescription 7 th			
	Relevant texts and articles from relevant sources.				

Subject Code	RS5212
Subject Title	Advanced Occupational Therapy Practice in Hand Rehabilitation
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Students enrolling in this subject should possess a professional degree in occupational therapy
Objectives	 To advance on students' knowledge and practical techniques in management of different types of hand dysfunction ranging from developmental, musculoskeletal and neurological conditions. To critically analyse the needs of patients with different hand conditions and to provide a comprehensive OT intervention programme to improve the overall function
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Demonstrate an understanding of the development of hand function from child birth to adulthood. b. Demonstrate a deep understanding of management of various types of hand dysfunction ranging from developmental, musculoskeletal and neurological conditions. c. Develop an evidence based approach in the solution of clinical problems of the hand dysfunction,, and to formulate & implement OT management. d. Demonstrate an understanding of OT management to common hand dysfunction in HK and Asian region.
Subject Synopsis/ Indicative Syllabus	 Updates on musculoskeletal science and pathology related to hand dysfunction Acute trauma (hand, burns, fractures, amputations) Chronic conditions (chronic pain syndrome, stiffness and contracture) Neurological conditions (stroke hand, quadriplegic hand, CP hand) Work Related Musculoskeletal Disorders (tennis elbow, carpal tunnel syndrome) Special consideration to people with special needs & geriatrics Evidence based practice of various OT modalities used in hand rehabilitation Splinting Pressure therapy Remedial training Assistive device and technology in advancing ADL and work practice Innovation and current practice in hand rehabilitation Clinical evaluation of the hand Advanced splinting/ pressure therapy Pain management Functional assessment and intervention Hand function training and mobilisation

Teaching/Learning Methodology	Lectures by local experts on the advanced management in hand evaluation and therapy Practical training sessions on clinical advancement in different hand conditions Interactive lectures by international experts in different countries and regions (via teleconferencing). Small group discussions and presentations by students on specific topic Individual project on special topic – written report and seminar presentation. E-case studies to enhance holistic management of different hand conditions								
Assessment Methods in Alignment with Intended Learning OutcomesSpecific assessment methods/tasks% WeightingIntended assesseda				ed subj ed (Please b	ect lear e tick as a C	ning ou ppropriate) d	tcomes to be		
	1. Practical assessment	40	~	~	\checkmark	~			
	2. Case review and presentation	30	~	~	~	~			
	3. Individual report	30	~	~	~	~			
	Total	100%				I			
	Explanation of the approprintended learning outcomes	priateness of	the as	sessme	nt met	hods in	assessing the		
Student Study	Class contact:		(39 Hrs.)						
Effort Expected	Lecture 6 Hr								
	Tutorial		6 Hrs.						
	Practical						27 Hrs.		
	Other student study effort:						(90 Hrs.)		
	 Self practice and clinic 	al practical ex	xperienc	es			30 Hrs.		
	 Group discussion/ case 	presentation					30 Hrs.		
	• E-case learning						30 Hrs.		
	Total student study effort						129 Hrs.		
Reading List and References	Textbook: Skirven, T.M., Osterman Rehabilitation of the hand a Mosby.	, A.L., Feo and upper ext	łorczyk, remity,	J.M. Volumo	& A e I and	madio, II. (6 th	P.C. (2011). Ed.). St. Louis:		
	Fess, EE., Gettle, KS., extremity splinting: principl	Philips, C.A es and metho	. & Jaı ds. St. L	nson, J .ouis: N	.R. (20 Iosby.	005). H	and and upper		

References Cooper, C. (2007). Fundamentals of Hand Therapy: Clinical reasoning and treatment guidelines for common diagnoses of the upper extremity. St. Louis: Mosby.
Henderson, A. & Pehoski, C. (2006). Hand Function in the child: Foundations for remediation. (2 nd Ed.). St. Louis: Mosby.
Hunter, J.M., Mackin, E.J. & Callahan, A.D. (2010). Rehabilitation of the hand: Surgery and therapy. (6 th Ed.). St. Louis: Mosby.
Recommended journals: -Journal of Hand Therapy -Journal of Hand Surgery -Journal of Plastic and Reconstructive Surgery -Research in Developmental Disabilities
Subject Code

Subject Title
Credit Value
Level
Pre-requisite / Co-requisite/ Exclusion
Objectives
Intended Learning Outcomes
Subject Synopsis/ Indicative Syllabus
Teaching/Learning Methodology
Assessment Methods in Alignment with Intended Learning Outcomes

Student Study Effort Expected	Class contact:	(39 Hrs.)			
	 Seminar/Tutorial 	33 Hrs.			
	Laboratory/Practical	6 Hrs.			
	Other student study effort:	(87 Hrs.)			
	 Self-study 	69 Hrs.			
	 Preparation of assignment/report 	18 Hrs.			
	Total student study effort	126 Hrs.			
Reading List and References	Kinesiology of Musculoskeletal System: Foundations for Rehabilitation, 3 ^r Edition, edited by Neumann DA. Elsevier, St Louis, United States, 2016.				
	The Comprehensive Textbook of Clinical Biomechanics, 2 nd Edition, author by Richards J. Elsevier Health Sciences, London, United Kingdom, 2018.				
	Physical Therapies in Sport and Exercise, 2 nd Edition, edited by Kolt GS, Synder-Mackler L. Churchill Livingstone, Edinburgh, 2007.				
	Other related articles on the specific topics.				

Subject Code	RS5220
Subject Title	Advanced Manipulative Physiotherapy Practice I
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Pre-requisite: RS555 Advanced Principle and Practice of Manipulative Physiotherapy (Lower Quarter) RS556 Advanced Principle and Practice of Manipulative Physiotherapy (Upper Quarter)
Objectives	To provide supervised clinical practice for students to integrate and utilize the principles and skills in the diagnosis and manipulative treatment that they have learned in classrooms and apply them in real life situations and environments.
	Upon completion of this subject, students should be able to demonstrate the level of proficiency, confidence and independence in the safety use of manipulative physiotherapy expected of a graduate in the field and to critically evaluate the management methods and to work in the framework of evidence-based approach.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Promote effective communication between patient and therapist, and with medical professionals and other health care providers. Perform a robust physical examination assess functional and pain behaviors of a patient with neuro-musculoskeletal disorder, in a safety manner. b. Generate a physical diagnosis from data collected from the physical examination, plan a treatment strategy in response to the physical diagnosis, Evaluate the effectiveness of the treatment and modify the treatment plan in relation to response observed. c. Reflect competency and confidence in the application of passive mobilisation and manipulative techniques, and other physiotherapeutic skills, in a safe and efficient manner. d. Appreciate ethical issues in risk management under clinical situations. e. Integrate the practice of manipulative therapy in the overall management plan within the health care teams.
Subject Synopsis/ Indicative Syllabus	As this module is the extension of material covered in other modules, i.e. "Physical Diagnosis of Neuro-musculoskeletal Disorders", "Advanced Principle and Practice of Manipulative Physiotherapy (Lower Quarter)" and "Advanced Principle and Practice of Manipulative Physiotherapy (Upper Quarter)", the syllabus is based on the application of principles and techniques in clinical situations.
Teaching/Learning Methodology	Clinical practice under close supervision. Progress of each student will be monitored throughout the subject. Seminars and case presentations in tutorial groups are subject requirements. Regular discussions and feedback, both formal (at mid-block and at the end) and informal, are given to students. Strength and weakness are identified.

Assessment										
Methods in Alignment with	Specific assessment methods/tasks	% weighting	Inten	ded sul sed (Ple	oject le ase tick a	arning s approp	ng outcomes to be			
Intended Learning Outcomes			а	b	c	d	e			
	1. Continuous assessment	10	~	~		~				
	2. Clinical reasoning case report	20	~	~	~	~	~			
	3. End of term clinical assessment **	70	~	~	~	~	~			
	Total	100%								
	Continuous assessment: Th attitude and patient care in the	is serves to ne clinical pla	assess acemen	studen t.	t's cor	ntinuou	is prog	ress, le	earning	
	Clinical Reasoning case report: This assessment aims to assess students' understanding of theory, pathology, and management of people with musculoskeletal dysfunctions.						anding ons.			
	End of term clinical assess reasoning, selection of eval- with musculoskeletal dysfur	ment: This a uation and tr nctions.	assessn eatmer	nent ai it choic	ms to ce and	evalua skills i	te stud n mana	ents' c iging p	clinical atients	
Student Study	Class contact:						(84 Hrs.)			
Effort Expected	Clinical							84 Hrs.		
	Other student study effort:							(40 Hrs.)		
	• Case reporting writing						20 Hrs.			
	 Reading/Self-study 							201	Hrs.	
	Total student study effort							124]	Hrs.	
Reading List and References	Banks K, Hengeveld E (20) Students. Edinburgh: Church	10) Maitland hill Livingsto	's Clini ne.	ical Co	mpani	on: An	Essen	tial Gu	ide for	
	Donatelli RA (2012) Physi Livingstone.	ical Therapy	of the	e Shou	lder. 5	th Ed.	St Lou	uis: Ch	urchill	
	Edwards BC (1999) Manua Heinemann.	al of Combin	ned Mo	ovemer	nts. 2 nd	Ed. C	Oxford:	Butter	worth-	
	Grieve GP (1991) Mobilisat Edinburgh: Churchill Living	tion of the Sp stone.	oine: A	Prima	ry Har	ıdbook	of Cli	nical N	lethod.	
	Fernández-de-las-Peñas C, Musculoskeletal Pain Syndr	Cleland JA, omes: An Ev	, Dom idence	merhol and Cl	t J (2 inical-i	016) N inform	Manual ed App	Thera roach.	py for	
	Hengeveld E, Banks K (2014) Maitland's Peripheral Manipulation. 5 th Ed. Edinburgh Churchill Livingstone.						burgh:			

Hengeveld E, Banks K (2014) Maitland's Vertebral Manipulation. 8 th Ed. Edinburgh: Churchill Livingstone.
Higgs J, Jones MA, Loftus S, Christensen N (2018) Clinical Reasoning in the Health Professions. 4^{th} Ed. Elsevier.
Jones MA, Rivett DA (2019) Clinical Reasoning for Musculoskeletal Practice. Elsevier.
Jull G, Moore A, Falla D, Lewis J, McCarthy C, Sterling M (2015) Grieve's Modern Musculoskeletal Physiotherapy. 4 th Ed. Edinburgh: Churchill Livingstone.
Lennard TA, Crabtree HM (2005) Spine in Sports. Philadelphia: Mosby.
Maitland GD (1986) Musculo-Skeletal Examination and Recording Guide. 4 th Ed. Glen Osmond: Lauderdale.
Petty NJ (2011) Neuromusculoskeletal Examination and Assessment: A Handbook for Therapists. 4 th Ed. Edinburgh: Churchill Livingstone.
Petty NJ (2011) Principles of Neuromusculoskeletal Treatment and Management: A Handbook for Therapists. 2 nd Ed. Edinburgh: Churchill Livingstone.
Stetts DM, Carpenter JG (2014) Physical Therapy Management of patients with Spinal Pain: An Evidence-Based Approach. SLACK Incorporated.
Richardson C, Hodges PW, Hides J (2004) Therapeutic Exercise for Lumbopelvic Stabilization: A Motor Control Approach for the Treatment and Prevention of Low Back Pain. 2 nd Ed. Edinburgh: Churchill Livingstone.
Other relevant text and articles from reference sources.

Subject Code	RS5221
Subject Title	Advanced Manipulative Physiotherapy Practice II
Credit Value	3
Level	5
Pre-requisite / Co-requisite/ Exclusion	Advanced Manipulative Physiotherapy Practice I
Objectives	This is a continuation of Advanced Manipulative Physiotherapy Practice I to provide supervised clinical practice for students to integrate and utilize the principles and skills in the diagnosis and manipulative treatment that they have learned in classrooms and apply them in real life situations and environments.
	Upon completion of this subject, students should be able to demonstrate the level of proficiency, confidence and independence in the safety use of manipulative physiotherapy expected of a graduate in the field and to critically evaluate the management methods and to work in the framework of evidence-based approach.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Reflect the level of proficiency, confidence and independence in the safety use of manipulative physiotherapy expected of a graduate in the field. b. Promote effective communication between patients and therapists, and with other medical professionals and health care providers. c. Advise patients and consult with other medical and health care providers on goals, prognosis and expectations of manipulative physiotherapy. d. Syntheses and utilise information through the physical diagnostic process so as to design and redesign preventive and post-treatment management strategy according to the observed clinical manifestations and ergonomic principle. e. Disseminate the clinical reasoning principle, effectiveness and limitations of manipulative physiotherapy to peer therapists and other health care providers.
Subject Synopsis/ Indicative Syllabus	As this module is the extension of material covered in other modules, i.e. "Physical Diagnosis of Neuro-musculoskeletal Disorders", "Advanced Principle and Practice of Manipulative Physiotherapy (Lower Quarter)", "Advanced Principle and Practice of Manipulative Physiotherapy (Upper Quarter)" and "Advance Manipulative Physiotherapy Practice I", the syllabus is based on the application of principles and techniques in clinical situations.
Teaching/Learning Methodology	Clinical practice under close supervision. Progress of each student will be monitored throughout the subject. Seminars and case presentations in tutorial groups are subject requirements. Regular discussions and feedback, both formal (at mid-block and at the end) and informal, are given to students. Strength and weakness are identified.

Assessment]		
Methods in Alignment with	Specific assessment methods/tasks	pecific assessment % Intended hethods/tasks weighting be assessed			ubject 1 (Please	pject learning outcomes to (Please tick as appropriate)					
Intended Learning Outcomes			а	b	c	d	e				
	1. Continuous assessment	10	~	\checkmark	✓						
	2. Clinical reasoning case report	20	~	~			~				
	3. End of term clinical assessment **	70	~	~	~	~	~				
	Total	100%									
	Continuous assessment: This se attitude and patient care in the cli Clinical Reasoning case report: 7 of theory, pathology, and manage	erves to asse inical placem This assessm	ss stuc ent. ent air	lent's ns to a	contin assess	studen	progre its' un	ss, lea dersta	arning nding		
	End of term clinical assessment reasoning, selection of evaluatio with musculoskeletal dysfunctio	of term clinical assessment: This assessment aims to evaluate students' clinical oning, selection of evaluation and treatment choice and skills in managing patient musculoskeletal dysfunctions.						inical tients			
Student Study	Class contact:						(84 Hrs.)				
Effort Expected	Clinical							84 Hrs.			
	Other student study effort:							(40 Hrs.)			
	• Case reporting writing					20 Hrs.					
	 Reading/Self-study 					20 Hrs.					
	Total student study effort							124 H	lrs.		
Reading List and References	Banks K, Hengeveld E (2010) M Students. Edinburgh: Churchill L	Maitland's Cl Livingstone.	inical	Comp	anion:	An E	ssentia	ıl Gui	de for		
	Borenstein DG, Wiesel SW, Comprehensive Diagnosis and M	Boden SI lanagement.) (200 3rd ed	04) L . Phila	.ow H delphi	Back a: Sau	and 1 nders.	Neck	Pain:		
	Donatelli RA (2012) Physical T Livingstone.	Therapy of t	he Sh	oulder	:. 5th	ed. St	Louis	s: Chi	urchill		
	Edwards BC (1999) Manual of Heinemann.	Combined M	Moven	nents.	2nd e	d. Oxf	ord: E	Butterv	vorth-		
	Fernández-de-las-Peñas C, Clel Musculoskeletal Pain Syndromes	and JA, Do s: An Eviden	mmerl ce and	holt J Clinic	(2016 cal-info	6) Ma ormed	nual 7 Appro	Therap ach.	by for		
	Grieve GP (1991) Mobilisation of Edinburgh: Churchill Livingston	of the Spine: e.	A Pri	mary]	Handb	ook of	Clini	cal Mo	ethod.		

Hengeveld E, Banks K (2014) Maitland's Peripheral Manipulation. 5th ed. Edinburgh: Churchill Livingstone.
Hengeveld E, Banks K (2014) Maitland's Vertebral Manipulation. 8th ed. Edinburgh: Churchill Livingstone.
Higgs J, Jones MA, Loftus S, Christensen N (2018) Clinical Reasoning in the Health Professions. 4 th Ed. Elsevier.
Jones MA, Rivett DA (2019) Clinical Reasoning for Musculoskeletal Practice. Elsevier.
Jull G, Moore A, Falla D, Lewis J, McCarthy C, Sterling M (2015) Grieve's Modern Musculoskeletal Physiotherapy. 4th ed. Edinburgh: Churchill Livingstone.
Lennard TA, Crabtree HM (2005) Spine in Sports. Philadelphia: Mosby.
Maitland GD (1986) Musculo-Skeletal Examination and Recording Guide. 4th ed. Glen Osmond: Lauderdale.
Petty NJ (2011) Neuromusculoskeletal Examination and Assessment: A Handbook for Therapists. 4th ed. Edinburgh: Churchill Livingstone.
Petty NJ (2011) Principles of Neuromusculoskeletal Treatment and Management: A Handbook for Therapists. 2nd ed. Edinburgh: Churchill Livingstone.
Richardson C, Hodges PW, Hides J (2004) Therapeutic Exercise for Lumbopelvic Stabilization: A Motor Control Approach for the Treatment and Prevention of Low Back Pain. 2nd ed. Edinburgh: Churchill Livingstone.
Stetts DM, Carpenter JG (2014) Physical Therapy Management of patients with Spinal Pain: An Evidence-Based Approach. SLACK Incorporated.
Wittink H, Michel TH (2002) Chronic Pain Management for Physical Therapists. 2nd ed. Boston: Butterworth-Heinemann.
Other relevant text and articles from reference sources.

Subject Code	RS5223				
Subject Title	Management of Executive Function Deficits for People with Developmental Disabilities				
Credit Value	3				
Level	5				
Pre-requisite/ Co-requisite/ Exclusion	Recommended background knowledge: At least one-year experience in working with people with developmental disabilities prior to applying for this subject.				
Objectives	The overall aim of this subject is to provide students with the opportunity to integrate scientific knowledge into their clinical practice. The focus will be on understanding theoretical frameworks of executive function, identification of patterns of executive function performance and development of skills to manage executive function deficits in people with developmental disabilities.				
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Interpret theoretical frameworks of executive function. b. Identify the patterns of executive function performance of people with developmental disabilities. c. Develop intervention program and apply strategies to enhance or maintain executive function performance in people with developmental disabilities. d. Apply technology in management of people with developmental disabilities and executive function deficits. 				
Subject Synopsis/ Indicative Syllabus	 Theoretical frameworks of executive function. Physiology of executive functioning. Executive function performance in people with developmental disabilities. Factors that shape the development of executive function across life span. Executive function assessment for clinical practice. Management of executive function deficits in people with developmental disabilities at home, school, work place and clinical settings. Advances in technology. 				
Teaching/Learning Methodology	Self-directed learning approach will be applied. Through lectures, fundamental knowledge of executive function, assessment method of executive function and contemporarily issues of management of executive function deficits of people with developmental disabilities will be introduced. Through seminars/workshops, students will be guided to develop intervention program or apply strategies to enhance or maintain the executive function performance of people with developmental disabilities. The students will consolidate the knowledge and skills by completion of the assignments.				

Assessment Methods in	Specific assessment methods/tasks	% weighting	Intended assessed (.	subject lear Please tick	ning outco ⁄as approp	mes to be riate)		
Alignment with Intended Learning			a	b	c	d		
Outcomes	1. Poster presentation	20		~				
	2. Intervention program design	80	~		~	~		
	Total	100%		1	1			
	Poster presentation – aims at encouraging students to communic understanding on the patterns of executive function performance of per developmental disabilities based on literatures in a short and precise format. will choose a clinical condition of people with developmental disabilities assignment.					nicate their people with nat. Students ties for this		
	Intervention program design – aims at facilitating students to integrate sci- knowledge to clinical practice in developing intervention program and ap strategies to enhance or maintain executive function performance in people developmental disabilities. Student will choose an area of intervention for people developmental disabilities for this assignment.							
Student Study	Class contact:					(39 Hrs.)		
Effort Expected	• Lecture		12 Hrs.					
	 Seminar/workshop 				27 Hrs.			
	Other student study effort	:			(70 Hrs.)			
	 Self-study 				30 Hrs.			
	 Assignment preparation 	on			40 Hrs.			
	Total student study effort					109 Hrs.		
Reading List and References	Barkley, R. (2020). Takin parents (4 th Ed.). New Yo	ng charge of rk, NY: Guilfo	ADHD: Th ord.	e complete,	authoritati	ve guide for		
	Dawson, P., & Guare, F practical guide to assessm	R. (2018). Exactly the ent and interv	ecutive skil ention. Nev	lls in child v York: Gui	ren and ado lford Press.	olescents: A		
	Dehn, M. J. (2015). Essentials of working memory assessment and intervention. Ne Jersey, NY: John Wiley & Sons.					ention. New		
	Goldstein, S., & Naglier New York, NY: Springer.	i, J. A. (Ed.).	(2014). H	andbook of	executive	functioning.		
	Meltzer, L. (Ed.). (2018) (2 nd Ed.). New York, NY:	. Executive fo Guilford.	unction in a	education: 1	From theory	y to practice		
Vohs, K. D., & Baumeister, R. F. (Ed.). (2016). Handbook of self-re Research, theory, and applications (3 rd Ed.). New York, NY: Guilford.						f-regulation:		

Subject Code	RS5224						
Subject Title	Research Seminar in Rehabilitation Sciences						
Credit Value	3						
Level	5	5					
Pre-requisite / Co- requisite/ Exclusion	Nil						
Objectives	To introduce different research disciplines in or related to rehabilitation sciences to students, and to appreciate and develop the critical thinking required in research						
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Possess a broadened perspective and understanding on research fields in or related to rehabilitation sciences b. Possess a deeper understanding of research methodologies c. Have enhanced critical thinking when reviewing research publications d. Have enhanced presentation skills e. Appreciate the importance of interaction among different research disciplines in rehabilitation research 						
Subject Synopsis/ Indicative Syllabus	Students are required to attend a series of seminars which cover the following topics, which are common research field in rehabilitation or related sciences: - Neurological rehabilitation and/or neuroscience - Aging and rehabilitation - Application of information technology in rehabilitation and healthcare - 'East-meets-West' in rehabilitation - Assistive technology - Public health - Basic Science and rehabilitation						
Teaching/Learning Methodology	The seminar will be in mass lecture format, and teachers may use multimedia to introduce different research activities (e.g. photographs, illustrations, footage, world-wide-web resources, etc). Students will be required to attend the seminar, review journal articles and perform a critical review on one selected article.						
Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks	% weighting	Intendo be asse approp	ed subje essed (Pl priate)	ct learnin lease tich	ng outco c √ as	omes to
	3. Attendance	15%	u. √	√	√.	<u>u.</u>	√
	4. Written Test (MCQs)	50%	\checkmark	\checkmark			✓
	5. Presentation	35%	\checkmark	\checkmark	\checkmark	\checkmark	
	Total number	100%			•		·
	1 Students are required in Q&A and discussion	to attend sen on session.	ninars a	nd will 1	be encou	araged t	o engage

	 MCQ test will be conducted in class and are students'understanding on the concepts, methods knowledge introduced in the seminar series. Res selected by teachers of each topic, and the content of of the seminar presentation and the selected papers. Students are required to perform critical appraisal (assigned by the teaching team) and present in a v Evaluation will be based on the evidence shown a understanding of the topic and presentation of me will be based on the scientific content of the presentation skills. 	e designed to assess ology, key facts and search papers will be the test will cover both on a research article video-recorded format. about critical thinking, ethodology. Evaluation presentation and the			
Student Study Effort	Class contact:	24hrs			
Expected	Lectures (seminar)	18 hrs			
	Tutorials and consultation	3 hrs			
	In-class assessment (test)	3 hrs			
	Other efforts:	90 hrs			
	Presentation Preparation	20 hrs			
	Reading selected journal papers	30 hrs			
	Self-study by reference list	40 hrs			
	Total Study Effort	114 hrs			
Reading List and References	Creswell JW & Creswell JD (2018). Research Design: Qualitative, Methods Approaches. 5 th Editon. SAGE, Thousand Oaks.	Quantitative, and Mixed			
	Bear MF, Connors BW, Paradiso MA. (2020). Neuroscience: explo Edition. Lippincott Williams & Wilkins, Baltimore.	ring the Brain. Enhanced			
	Kandel ER, Schwartz JH, Jessell TM, Siegelbaum SA, Hudspeth A. Neural Science, Fifth Edition, McGraw-Hill Professional.	J (2013) Principles of			
	Carol M. Davis (Ed) (2017). Integrative therapies in rehabilitation : evidence for efficacy therapy, prevention, and wellness. Thorofare, NJ.				
	Perkinson, Braun & Perkinson, Margaret A(2020). Teaching studen Routledge, Oxfordshire.	ts geriatric research.			
	Encarnação, P., IOS Press, & Ebrary, Inc. (2013). Assistive technol practice ; AAATE 2013 (Assistive technology research series ; v. 3) Press.	ogy : From research to 3). Amsterdam: IOS			
	Bailey, S., & Handu, D. (2013). Introduction to epidemiologic resea health practice. Burlington, MA: Jones & Bartlett Learning.	arch methods in public			

Subject Code	RS600
Subject Title	Diagnostic Procedures in Musculoskeletal Physiotherapy
Credit Value	3
Level	6
Pre-requisite / Co-requisite/ Exclusion	Foundation knowledge of musculoskeletal physiotherapy equivalent to the level of a recognized physiotherapy undergraduate programme
Objectives	 To provide knowledge of the use of musculoskeletal diagnostic imaging required for patient screening, triage and specialists referral relevant to the practice of sports and musculoskeletal physiotherapy. To integrate knowledge of pathological processes with clinical and radiological findings providing the basis for sound clinical reasoning processes in the management of patients with musculoskeletal conditions.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Determine the indications for prescription of various musculoskeletal diagnostic imaging based on the patient's clinical presentation and the current best evidence for diagnosis. b. Describe basic concepts of the common musculoskeletal image acquisitions. c. Recognize the appearance of normal anatomy and common pathology on musculoskeletal images to facilitate diagnosis and appropriate intervention strategies. d. Integrate knowledge of anatomy, pathological process, clinical and imaging findings with clinical reasoning skills to facilitate generation of differential diagnosis, determination of the prognosis and plan of care in the management of patients.
Subject Synopsis/ Indicative Syllabus	 Use of diagnostic imaging and choice of procedure evidence-based clinical practice guidelines indications and accuracy diagnostic utility of imaging procedures for select pathology risks, benefits and associated costs Common diagnostic assessment for musculoskeletal disorders for different body parts plain film radiograph computed tomography magnetic resonance imaging ultrasonography nuclear medicine Clinical reasoning skills related to determining a patient's appropriateness for physiotherapy treatment identify signs and/or symptoms that are of non-musculoskeletal origin assessing red flags/yellow flags for musculoskeletal conditions
Teaching/Learning Methodology	Lectures, interactive case-based discussions The lectures will be delivered by a faculty of consultant radiologists, orthopaedic surgeons, rheumatologists, physiotherapists, sports physicians in the field of sports and musculoskeletal medicine.

Assessment Methods in Alignment with Intended Learning	Specific assessment methods/tasks	% weighting	Intended subject learning assessed (Please tick as			ning outcomes to be as appropriate)		s to be e)
Outcomes			а	b	с	d		
	1. Written test	40	~	~	~	~		
	2. Presentation	30	~	~		✓		
	3. Essay	30	~	~		\checkmark		
	Total	100%						
	 Written test – to evaluate t Presentation – students are readings or research. Essay – students are requi in diagnostic imaging, cor topic related to musculosk 	he students' e required to red to write nmon pathol eletal physio	underst presen up an e logy an therapy	canding t views essay, v d clinic 7.	and kno on a so vith inte al reaso	owledg et topic egration oning sl	e. based n of kno cills in	on their owledge on a set
Student Study	Class contact:					(39 Hrs.)		
Effort Required	Lectures						33 Hrs.	
	Tutorials/Seminars					6 Hrs.		
	Other student study effort:						(80	Hrs.)
	 Self-study 						45	Hrs.
	 Preparation of essay & pr 	resentation					35	Hrs.
	Total student study effort						119	Hrs.
Reading List and References	Goodman CC, Fuller KS (2009). Pathology: Implications for the physical therapist. 3 ed. St Louis. MO: Saunders Elsevier (ISBN: 978-1-4160-3118-5).				pist. 3 rd			
	Goodman CC, Snyder TEK (2007). Differential diagnosis for physical therapist Screening for referral. 4 th ed. St Louis. MO: Saunders Elsevier (ISBN-13: 978-0-721 0619-4).				erapists. 0-7216-			
	Greenhalgh S, Selfe J (2006). the spine. Churchill Livingstor	Red flags: ne (ISBN-10	a guide : 0443-	e to ide 10140X	ntifying ().	g seriou	s pathc	ology of
	Greenhalgh S, Selfe J (2009). the spine. Churchill Livingston	Red Flags ne (ISBN: 97	II: A g 78-0-44	uide to 3-06914	solving 1-7).	g seriou	is patho	ology of
	McKinnis LN (2010). Fund perspectives in rehabilitation) 8036-1946-3).	amentals of . 3 rd ed. Phi	muscu ladelph	uloskele ia. FA	etal im Davis (aging Co. (IS	(Conter BN-13:	mporary 978-0-
	Swain J, Bush KW, Brosing J Louis. MO: Saunders Elsevier	J (2009). Dia (ISBN: 978-	agnosti -1-4160	c imagi -2903-8	ng for (8).	physica	l thera	pists. St

Subject Code	RS606
Subject Title	Advanced Study in Autism Spectrum Disorder
Credit Value	3
Level	6
Pre-requisite / Co-requisite/ Exclusion	Recommended background knowledge: At least one year experience in working with people with autism spectrum disorder.
Objectives	This subject aims to enhance the scope and depth in understanding the deficits, theories and intervention on people with autism spectrum disorder (ASD). This subject focuses on theoretical basis of intervention and reviewing provision of support to people with ASD in local context.
Intended learning Outcomes	 Upon completion of the subject, students will be able to: a. Assimilate deficits of ASD based on previous researches. b. Interpret theoretical models explaining ASD. c. Differentiate the theoretical basis of interventions for ASD. d. Criticize previous studies on interventions on ASD. e. Evaluate systems of support in local context.
Subject Synopsis / Indicative Syllabus Teaching/Learning Methodology	 Recent research and understanding on deficits of ASD, including: Neurophysiological aspect Psychosocial aspect Behavioral aspects Theories in conceptualizing ASD, including: Neurodevelopmental theories Psychological theories Psychological theories Environmental theories Interventions for people with ASD, including: Developmental and social-relational approaches Sensory-motor approaches Cultural approaches Cultural approaches Systems of support in local context, including: Provision of support to family with members with ASD Provision of support to school with students with ASD Provision of support to school with students with ASD Interactive and self-directed learning approaches are the principle teaching and learning methodologies. Lectures will cover the knowledge in theories and recent advances in the field. Seminars will be conducted by speakers with expertise on related topic or by students to present their views on practices in the field of rehabilitation. Students will review literatures, discuss, practice and do self-reflection on topics covered in this subject. Students are encouraged to link theory and practice.

Assessment Methods in	Specific assessment methods / tasks	% weighting	Intene be ass	ded su	bject le (Please	earning e tick a	outcon s	nes to
Alignment with			appro	priate)			
Intended Learning	1 1 1	(0)	a	b	c	d	e	
Outcomes	1. Written assignment	60	v	v	v	v	v	
	2. Seminar	40		\checkmark	\checkmark	\checkmark	\checkmark	
	presentation	100%						
	Total	10070						
	Written assignment (60%) an individual report. The on assessment or intervent the student's ability of cr knowledge.	– achieve intende written assignmen tions about ASD. 7 ritical thinking in	d learni t will c The writ theories	ing ou over li tten as s and	tcomes iteratur signme practic	#a-e the re revie ent is us e, and	hrough w and sed to e integra	writing critique evaluate ation of
	Seminar presentation (40% presentation of journal pa and individual presentatio written assignment. The s of critical thinking in theorem	6) – achieve intend pers of a chosen t on of report on a eminar presentatio ries and practice.	led lear opic of assessm n is use	ning o theori ent or ed to e	utcome ies in c interv evaluate	es #b-e concept ventions e the st	throug ualizin s evalu udent's	h group g ASD, lated in s ability
Student Study	ent Study Class contact:						(39 H	ours)
Effort Expected	• Lectures					6 Hours		
	• Seminars					33 Hours		
	Other student study effort:						(81 H	ours)
	• Literature search and s	self-reading					32 H	Iours
	• Preparation of seminar assignment	r presentations and	written	l			39 H	Iours
	• Practicum						10 H	Iours
	Total student study effort						120 H	Iours
Reading List and References	Cicchetti, D., & Gunnar research in child psychology	, M. R. (2009). gy. Hoboken, NJ: .	<i>Meetin</i> John W	g the iley &	<i>challe</i> Sons.	enge oj	f trans	lational
	Glezerman, T. B. (20 <i>interpretation</i> . New York,	13). Autism and NY: Springer.	d the	brair	n: Ne	urophe	nomeno	ological
	Gutstein, S. E. (2009). <i>Th</i> and PDD with Relations Connecting Centre Publish	e RDI book: Forg ship Development ning.	ing nev Interv	v path ention	ways fo [®] Prog	or autis gram.	sm, Asp Houste	oerger's on, TX:
	Hall, L. J. (2009). <i>Autism</i> River, NJ: Merrill/Pearson	spectrum disorder	s: Fron	n theor	ry to pi	ractice.	Upper	Saddle
	Kalyva, E. (2011). Autist Sage.	n: Educational an	d thera	ipeutic	e appro	oaches.	Londo	on, UK:

McGregor, E., Núñez, M., Cebula, K., & Gómez, J. C. (Ed.) (2008). Autism: An integrated view from neurocognitive, clinical, and intervention research. Malden, MA: Blackwell.
Mesibov, G. B., & Howley, M. (2003). Accessing the curriculum for pupils with autistic spectrum disorders using the TEACCH programme to help inclusion. London, UK: David Fulton.
Prizant, B. M., Wetherby, A. M., Rubin, E., Laurent, A. C., & Rydell, P. J. (2006). <i>The SCERTS</i> [®] <i>Model: A comprehensive educational approach for children with autism spectrum disorders</i> . Brookes.
Royeen, C. B., & Luebben, A. J. (Ed.) (2009). <i>Sensory integration: A compendium of leading scholarship</i> . Bethesda, MD: American Occupational Therapy Association.
Sarafino, E. P. (2012). Applied behavior analysis: Principles and procedures for modifying behavior. Hoboken, NJ: Wiley.
Waterhouse, L. (2013). <i>Rethinking autism: Variation and complexity</i> . London, UK: Academic Press.
Zimmerman, A. W. (2008). <i>Autism: Current theories and evidence</i> . Totowa, NJ: Humana Press.

Subject Code	RS607
Subject Title	Brain and Behaviour
Credit Value	3
Level	6
Pre-requisite / Co-requisite/ Exclusion	Recommended background in biological sciences, psychology or other health-related disciplines.
Objectives	The course aims to provide an integrative exploration of the current understanding of the neural basis of behaviour in terms of neuroscience and psychological principles. It is suitable for those who wish to enhance relevant knowledge and analytic skills in preparation for a research degree in psychological sciences and the neurosciences. This course will use a range of topics to illustrate how the neural basis of mental processes may be elucidated.
Intended learning Outcomes	 Upon completion of the subject, students will be able to: a. Consolidate current neuroanatomical and neurophysiological knowledge of the brain pertinent to the analysis of brain function and brain health. b. Articulate and apply the basic principles of neuroscience underpinning our understanding of normal behaviour and behavioural dysfunction. c. Describe and explore the interplay between mental and neural processes with concrete examples in health and disease. d. Appreciate the range of modern approaches that can be applied to the study of mental processes and brain function and their intrinsic limitations.
Subject Synopsis / Indicative Syllabus	 Current understanding of the cellular constituents, and the structural and organizational principles and of the mammalian brain and central nervous system. The emerging neuroscience and psychological principles of behavioural and mental processes, and relations to diseases and dysfunction of brain and behaviour. Approaches to the study of the link between brain and behaviour, from in vivo animal models, electrophysiology, psychopharmacology, morphometry, neuropsychological and functional imaging. Contemporary development and controversies in the neural basis of specific conditions, e.g., schizophrenia, mood disorder, and cognitive impairment. Application of central concepts underlying the link between brain and behaviour to evaluate and speculate potential neural mechanisms underlying current rehabilitation practices for specific psychiatric conditions and symptoms.
Teaching/Learning Methodology	 The principles of blended learning are incorporated to enrich the learning experience, encourage proactive learning, critical thinking, and facilitate the extended application of the core concepts to be delivered by face-to-face lectures. Pre-class materials will be provided online to encourage proactive preparation prior to all face-to-face sessions. Laboratory sessions provide immersive experiential learning to reinforce the concepts acquired through lectures and self-learning. The concepts are consolidated by students' review of lecture content and evaluated by post-lecture MCQ quiz designed to correct any misconception. Discussion of high-profile research papers delivered through class presentation in group provide opportunity for critical thinking and skills in the evaluation of scientific articles.

	• The requirement of an or students' ability to explore to treatments of unclear mo an integration of current kn and a demonstration of cri content acquire throughout	essay assignm application of echanisms in re nowledge relat- itical thinking the course is ac	ent perr neuroscie ehabilitat ed to reh skills an chieved.	nits indiv entific and ion interv abilitation d extended	ridual eva l biologica ention. Th theory and d applicat	aluation on al principles nrough this, nd practice, ion of core
Assessment Methods in Alignment with Intended Learning Outcomes	 and a demonstration of cricontent acquire throughout Specific assessment methods/tasks 1. Laboratory report 2. MCQs 3. Flipped classroom homework 4. Paper discussion & presentation 5. Written assignment Total 1. Laboratory reports should keeping with the intended both factual and reflectient experienced), respectively. 2. MCQs are conducted in knowledge with an emphase foundations underlying all 3. Lab & demo are to be interesting and the factual and reflecting and the section of the sec	tical thinking the course is ac % weighting 10% 10% 20% 30% 30% 100% 1 contain both learning outco ive component class and are sis to detect an four ILOS. egrated with fli	skills and chieved. Intend to be a approp a. \checkmark \checkmark \checkmark \checkmark \checkmark descript mes, wh ts (inclu designed d correct	d extended ed subject issessed (F priate) b. v v v v v v ive and e dich require ding diff to consc common	d applicat	ion of core outcomes \sqrt{as} d. \sqrt{as}
	 learning and engagement exchange between student This is independent on the 4. Individual group presentation investigative issues related students to present in claudience in terms of ILC covered by ILO (b), which principles are evaluated and to support this mood of ass 5. The requirement of an students' ability to explore to treatments with unclaintervention. Through the rehabilitation theory and point with extended application evaluated at both analytic applied to the support of the super of the support of the support of the super of the support of the support of the support of the super of the supe	during lab/de ts, during class Lab report to b tion of semina to mental diso ass, designed Ds (c) and (d). hereby discuss d/or challenged essament/learnin essay assignm application of ear/unknown nis, integration practice, and d of core cont and synthetic le g.	emo. Stu s would e handed l papers rders or o to chall. Referen sion and l. Tutoria ng. ent perr neuroscio mechanis n of cu lemonstra ent acqu evels. To	idents per form the l in as indi on contro dysfunctio enge both ice to fun l reference al and conse nits indiventific and sms in c urrent kn ation of c ire throug ppics are d	rformance basis of vidual ass oversial the on will be the presidential damental the to neusultation a vidual eval builtation a vidual eval vidual vidual eval vidual vidual eval vidual vidual eval vidual eval vidual eval vidual eval vidual eval vidual vidual vidual eval vidual vidual vidual eval vidual vidual	e, including assessment. aignment. ainking and selected for senters and knowledge proscientific are designed aluation on al principles chabilitation related to nking skills course are o encourage

Student Study	Class contact: (34 Hours)				
Effort Expected	Lectures	20 Hours			
	Tutorials and consultation	3 Hours			
	Flipped classroom	6 Hours			
	Demonstration and Lab 3 Hou				
	In-class assessment (presentation and quiz) 2				
	Other effort:	(71 Hours)			
	Presentation & Discussion – Preparation	12 Hours			
	Written Assignment	20 Hours			
	e-Learning	6 Hours			
	Self-study by textbook and assigned papers	33 Hours			
	Total study effort	105 Hours			
Reading List and	Core textbooks:				
References	Carlson NR, Birkett MA (2017) Physiology of Behavior, 12 th edition, Pearson. ISBN 10: 1-292-15810-7				
	Additional materials for reference on specific topics:				
	Barlow DH, Durand VM (2017) Abnormal Psychology: An Integrated App edition, Cengage. ISBN-13: 978-1111343651				
	Glickstein M (2014) <i>Neuroscience: A Historical Introduction</i> . T 13: 978-0262026802	(4) Neuroscience: A Historical Introduction. The MIT Press. ISBN- 002			
	Kandel ER, Schwartz JH, Jessell TM, Siegelbaum SA, Hudspeth AJ (2013) P of Neural Science, Fifth Edition, McGraw-Hill Professional. ISBN-1 0071390118				
	Selected review and opinion articles from:				
	Nature Reviews Disease Primers				
	Nature Reviews Neuroscience				
	Trends in Neurosciences				
	Annal Reviews of Neuroscience				

Subject Code	RS6004
Subject Title	Advances in Congenital pathophysiology and pediatric rehabilitation
Credit Value	3
Level	6
Pre-requisite/ Co-requisite/ Exclusion	Nil
Objectives	This subject aims at extending students' research interest in embryology, congenital disorders and pediatric rehabilitation. This is achieved through equipping students with advanced knowledge on the complex processes of prenatal development, discussion on experimental design and research methodology on the cellular and molecular embryology and pathophysiology of common congenital diseases, and familiar with the recent research advancement on skill sets for pediatric rehabilitation on selected congenital diseases.
Intended Learning Outcomes	 Upon completion of the subject, students will be able to: a. Understand and appreciate the advanced research on the basic cellular and molecular processes of prenatal development. b. Familiar with different experimental design and research methodology in understanding gene functions and cellular activities in relation to embryonic development. c. Correlate the novel genetic defects published in the literatures with the congenital pathophysiology and the clinical presentation of congenital diseases. d. Understand the in-depth underlying cellular and molecular mechanisms of the most up-to-date pediatric rehabilitation skills on selected congenital diseases.
Subject Synopsis/ Indicative Syllabus	 Common causes of congenital malformation Fertilization, implantation, and the role of <i>In vitro</i> fertilization Cellular and molecular processes of Embryonic disk formation Gastrulation Gastrulation Neurulation Fundamental understanding of organogenesis, and research on malformation of: The nervous system The cardiovascular and pulmonary systems Limbs and the musculoskeletal system The gastrointestinal system The urogenital system Head, neck, eyes and ears Research methodology on illustrating gene functions through genetic manipulation in animal models Current approaches in prenatal screening and postnatal diagnosis of congenital malformations Advanced research in pediatric rehabilitation of selected congenital disorders

Teaching/Learning Methodology	This subject is designed to provide students with lectures (either face to face or online teaching mode, whichever applicable) together with online self-study materials to facilitate learning of concepts and knowledge on the normal embryonic development as well as pathophysiology of congenital diseases. Relevant research articles on embryonic development, congenital malformations and the respective rehabilitation will be discussed in class. Practical (lab) classes help students understand the embryonic development in a 3-dimensional view, as well as introducing various up-to-date pediatric intervention. Students will participate in in-depth collaborative learning through literature searching during preparation for seminar presentation and assignment on selected topics.					
Assessment Methods in	Specific assessment % methods/tasks weight		Intended subject learn assessed (Please tick ✓ a		ing outcomes to be as appropriate)	
Alignment with Intended Learning			a	b	c	d
Outcomes	1. Class Participation	10	~	✓	✓	\checkmark
	2. Lab Report	20	\checkmark	\checkmark	\checkmark	
	3. Seminar	30	\checkmark	\checkmark	\checkmark	\checkmark
	4. Written	40	√	✓	\checkmark	\checkmark
	Total	100%				
	 Explanation of the ap intended learning outcome class discussion Practical (lab) topics (e.g. man skill demonstrated Individual or gradelivering literated learn, appreciated published data i Research on see practice skills of integration across 	propriatenes omes: el 6 subject, s and express classes will mmalian emb tion for comm oup presentat ture findings a and challen n the literature elected topic of data analys ss levels of ex-	ss of the a students are their viewpo be arranged oryo display non congeni- tions allow in a presen nge other s re. through w is, critical a xplanation.	ssessment met e encouraged to oints. d to arouse stu , genetic mani ital defects etc). students to wor table way. Stud tudents' resear- ritten assignme application of ac	hods in as actively p idents' int pulation, r k (or work lents are er ch finding ent allows cquired kno	exercising the participate in erest on the ehabilitation together) in acouraged to s as well as students to powledge and
Student Study	Class contact:				(39 Hrs)	
Effort Expected	• Lecture					30 Hrs
	Practical				9 Hrs	
	Other student study effort				(79 Hrs)	
	Preparation for pres	entation and a	assignment		40 Hrs	
	Self-study			39 Hrs		
	Total student study effo	rt				118 Hrs

Reading List and References	Suggested Readings:			
	• Carachi R and Doss SH. (eds.) (2019). Clinical EmbryologyAn Atlas of Congenital Malformations. Springer, Cham, Switzerland.			
	• Moore KL, Persuad TVN and Torchia MG. (2019). Before We Are Born: Essentials of Embryology and Birth Defects. 10 th ed. Saunders, Philadelphia, USA.			
	• Moore KL, Persuad TVN and Torchia M (2015). The Developing Human: Clinically Oriented Embryology. 10 th ed. Saunders. Philadelphia, USA.			
	 Lundy-Ekman L. (2018). Neuroscience – Fundamentals for Rehabilitation. 5th ed. Saunders. Philadelphia, USA. 			
	Other readings:			
	On-line materials for self-study			
	• Selected papers in journals: <i>The Journal of Pediatrics, Research in Developmental Disabilities, Human Reproduction, Development, Genes & Development, etc.</i>			





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