



Course Syllabus

1	Course title	Neuro clinical
2	Course number	1812452
3	Credit hours	3 (Clinical)
	Contact hours (theory, practical)	6 hours/week
4	Prerequisites/corequisites	Applied Occupational Therapy for Physical and Neurological Disorders (1812327)
5	Program title	Bachelor's in occupational therapy
6	Program code	1802
7	Awarding institution	The University of Jordan
8	School	School of Rehabilitation Sciences
9	Department	Occupational Therapy
10	Course Level	Undergraduate
11	Year of study and semester (s)	Fourth Year/ First Semester
12	Other department (s) involved in teaching the course	None
13	Main teaching language	None
14	Delivery method	<input checked="" type="checkbox"/> Face-to-face learning <input type="checkbox"/> Blended <input type="checkbox"/> Fully online
15	Online platforms(s)	Moodle <input checked="" type="checkbox"/> Microsoft Teams <input type="checkbox"/> Skype <input type="checkbox"/> Zoom <input type="checkbox"/> Others.....
16	Issuing/Revision Date	October 6, 2024

17 Course Coordinator:

Name: Salma Abuduljaber, MSc, OT

Contact hours: Wednesdays

Office number: 705

12:00pm – 2:00pm

Email: Salma.alwadi@hotmail.com or S.Abduljaber@ju.edu.jo

18 Other instructors:

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19 Course Description:

In this fieldwork training, the students visit several hospitals and clinics for neurological and physical dysfunctions to apply the OT assessment and intervention methods learned in previous courses.

20 Course aims and outcomes:

A- Aims:

This course is designed to provide in-depth clinical experience to develop skills in performing assessments, treatment plans, delivering therapy, and re-evaluation for patients who have neurological conditions such as Stroke, Spinal cord injury, Traumatic Brain Injury, and neurodegenerative diseases. The training will be at different sites in Jordan where OT services are.

B- Students Learning Outcomes (SLOs):

Upon successful completion of this course, students will be able to:

SLOs SLOs of the course	SL O (1)	SL O (2)	SL O (3)	SL O (4)	SL O (5)	SL O (6)	SL O (7)	SL O (8)	SL O (9)	SL O (10)	SL O (11)
Screen and evaluate clients with Neurological dysfunctions, and formulate intervention plans to enhance occupational performance.			x								
Execute therapeutic interventions for clients with Neurological dysfunctions in different practice settings.				x							
Evaluate intervention outcomes and adapt the intervention plan for clients with Neurological dysfunctions in different practice settings.					x						
Produce accurate and comprehensive documentation for the occupational therapy process listed in C1, C2, and C3.						x					
Comply with professional, ethical, and institutional policies and procedures, and integrate clinical reasoning, evidence-based practice, and effective use of resources.								x			
Operate within interprofessional teams of clients, healthcare providers, and communities.										x	
Apply leadership skills to advance occupational therapy										x	

within Neurological dysfunction practice.												
Navigate occupational therapy practice within the local healthcare system.						x						

Program SLOs:

1. Utilize knowledge of occupational therapy philosophy, theories, models, approaches, and frameworks in the practice of occupational therapy.
2. Apply the therapeutic use of occupation for individuals of different age groups and communities, within contemporary and future settings such as hospitals, schools, homes, etc, and with different diagnoses (such as pediatrics, neurological, physical, and psychiatry).
3. Assess and evaluate individual and environmental barriers to occupational performance, using a variety of formal, informal, standardized, and non-standardized assessment tools and methods.
4. Develop treatment plans collaboratively with clients, demonstrating the application of best evidence, effective use of resources, and client-centered practice.
5. Implement, identify and critically evaluate interventions.
6. Document evaluation results and progress using a variety of methods (including accurate evaluation forms/progress notes/discharge records), demonstrating the ability to adapt communication styles to meet different needs of practice
7. Demonstrate service management principles and the government, economic, social, and political issues that affect clinical practice
8. Adhere to professional ethics when dealing with individual and their families realize the importance of client-centered practice, and have self-confidence and independence of personality.
9. Develop problem-solving strategies, clinical reasoning, and critical reflection on practical scenarios, and synthesize knowledge through the evaluation process.
10. Reflect skillful communication, leadership, time management, lifelong learning using appropriate communication technologies
11. Utilize research findings in the practice of occupational therapy.

21. Topic Outline and Schedule:

Week	Lecture	Topic	Student Learning Outcome	Learning Methods (Face to Face/Blended/ Fully Online)	Platform	Synchronous / Asynchronous Lecturing	Evaluation Methods	Resources
1	1.1		1.1,1.2,2.1,2.2,3.1,3.2,4,1,3.4.1,4.2		Microsoft teams	Synchronous	-	1,2
	1.2	Orientation -Manual discussion		Face to face			Professional behaviors and	1,2

							Assignment discussion	
	1.3	Orientation (occupational profile)						1,2
2	2.1	Clinical visits and Seminars	1.1,1.2,2.1,2.2,3.1,3.2,4,1,3.4.1,4.2				Discussions (assessment) -Supervisor evaluation	1,2
	2.2	Clinical visits and Seminars					-Discussions -Supervisor evaluation	1,2
	2.3	Clinical visits and Seminars					SOAP note	1,2
3	3.1	Clinical visits and Seminars	1.1,1.2,2.1,2.2,3.1,3.2,4,1,3.4.1,4.2				-Discussions -Supervisor evaluation	1,2
	3.2	Clinical visits and Seminars					SOAP note	1,2
	3.3	Clinical visits and Seminars					-Discussions -Supervisor evaluation	1,2
4	4.1	Clinical visits and Seminars	1.1,1.2,2.1,2.2,3.1,3.2,4,1,3.4.1,4.2				SOAP note	1,2
	4.2	Clinical visits and Seminars					-Discussions -Supervisor evaluation	1,2
	4.3	Clinical visits and Seminars					SOAP note	1,2
5	5.1	Clinical visits and Seminars	5.1,5.2,6.1,6.2,7.1,7.2,8,1,8,2				-Discussions -Supervisor evaluation	1,2
	5.2	Clinical visits and Seminars					SOAP note	

	5.3	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	
6	6.1	Clinical visits and Seminars	5.1,5.2,6.1,6.2,7.1,7.2,8,1,8,2				SOAP note	
	6.2	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	
	6.3	Clinical visits and Seminars					SOAP note	
7	7.1	Clinical visits and Seminars	5.1,5.2,6.1,6.2,7.1,7.2,8,1,8,2				-Portfolio -Discussions -Supervisor evaluation	
	7.2	Clinical visits and Seminars					SOAP note	
	7.3	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	
8	8.1	Clinical visits and Seminars	5.1,5.2,6.1,6.2,7.1,7.2,8,1,8,2				SOAP note	
	8.2	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	
	8.3	Clinical visits and Seminars					SOAP note	
9	9.1	Clinical visits and Seminars	5.1,5.2,6.1,6.2,7.1,7.2,8,1,8,2				-Portfolio -Discussions -Supervisor evaluation	
	9.2	Clinical visits and Seminars					SOAP note	

	9.3	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	
10	10.1	Clinical visits and Seminars	9.1,9.2,9.3,10.1,10.2,11.1,11.2,12.1,12.2				SOAP note	
	10.2	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	
	10.3	Clinical visits and Seminars					SOAP note	
11	11.1	Clinical visits and Seminars	9.1,9.2,9.3,10.1,10.2,11.1,11.2,12.1,12.2				-Portfolio -Discussions -Supervisor evaluation	1,2
	11.2	Clinical visits and Seminars					SOAP note	1,2
	11.3	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	1,2
12	12.1	Clinical visits and Seminars	9.1,9.2,9.3,10.1,10.2,11.1,11.2,12.1,12.2				SOAP note	1,2
	12.2	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	1,2
	12.3	Clinical visits and Seminars					SOAP note	1,2
13	13.1	Clinical visits and Seminars	9.1,9.2,9.3,10.1,10.2,11.1,11.2,12.1,12.2				-Portfolio -Discussions -Supervisor evaluation	1,2
	13.2	Clinical visits and Seminars					SOAP note	1,2

	13.3	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	1,2
14	14.1	Clinical visits and Seminars	9.1,9.2,9.3,10.1,10.2,11.1,11.2,12.1,12.2				SOAP note	1,2
	14.2	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	1,2
	14.3	Clinical visits and Seminars					SOAP note	1,2
15	15.1	Clinical visits and Seminars	9.1,9.2,9.3,10.1,10.2,11.1,11.2,12.1,12.2				-Portfolio -Discussions -Supervisor evaluation	1,2
	15.2	Clinical visits and Seminars					SOAP note	1,2
	15.3	Clinical visits and Seminars					-Portfolio -Discussions -Supervisor evaluation	1,2

22 Evaluation Methods:

Opportunities to demonstrate achievement of the SLOs are provided through the following assessment methods and requirements:

Category		Brief Description (Neuro)	Date	Grade 100%
Midterm (40%)	Theoretical exam	Midterm exam	Week 8	30
	Practical-Live video quiz		Week 8	10
Evaluation during training (30%)	Practical-Clinical	Supervisor assessment	Throughout the semester	20



		Intervention Tool Oct 30th, 2024	-	10
Final (30%)	Practical (30)	Video-based case-scenario clinical reasoning evaluation	During the last 2 weeks of the semester	30

23 Course Requirements

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24 Course Policies:

A- Attendance policies:

Attendance will be taken periodically throughout the semester.

Students are expected to attend and actively participate in all classes.

Students are expected to be on time.

When the student is unable to attend class, it is a courtesy to notify the instructor in advance using either e-mail or phone.

Repeated tardiness or leaving early will not be accepted.

Students who miss class (or any portion of the class) are responsible for the content. Any student who misses a class is responsible for obtaining copies of notes, handouts, assignments, etc. from class members who were present. If additional assistance is still necessary, an appointment should be scheduled with the instructor. Class time is not to be used to go over the material with students who missed class(es).

An absence of more than 15% of the number of classes, which is equivalent to (3) classes, requires that the student provides an official excuse to the instructor and the dean.

If the excuse was accepted the student is required to withdraw from the module.

If the excuse was rejected the student will fail the module and a mark of zero will be assigned as suggested by the laws and regulations of the University of Jordan.

B- Absences from exams and handing in assignments on time:

The instructor will not do any make-up exams.

Exceptions for make-up exams and late submission of class assignments will be made on a case-by-case basis for true personal emergencies that are described as accepted by the regulations of UJ (e.g., documented medical, personal, or family emergency).

Make-up exams will be arranged if justifications for missing the exam satisfy the above. It is the student's responsibility to contact the instructor within 24 hours of the original exam to schedule a make-up session. A make-up exam should be taken within a week from the original exam date, unless the student can provide documentation that makes meeting that deadline impossible; otherwise, the recorded score for that exam for student will be a zero.

Late assignments will not be accepted and submission of assignments (due to unjustified absence from class) by other students will not be accepted regardless of how much work the student put into its preparation.

C- Health and safety procedures:

Students are not expected to use any heavy tools or equipment that might impose health and safety issues during this course.

Students should work safely, including being able to select appropriate hazard control and risk management, reduction, or elimination techniques in a safe manner in accordance with health and safety legislation.

Students should understand the importance of and be able to maintain confidentiality.

Students should understand the importance of and be able to obtain informed consent.

Students should know the limits of their practice and when to seek advice or refer to another professional.

D- Honesty policy regarding cheating, plagiarism, and misbehavior:

Students are expected to observe all University guidelines about academic misconduct.

Any work submitted by a student for academic credit must be the student's work. Submission of work taken directly from another source (e.g., book, journal, internet, clinic forms, or another student's work) will be considered plagiarism and the student/group will get a zero grade for that work if part of an assignment. In addition, if copying occurred, both the student who copied the work and the student who gave material to be copied (if applicable) will receive a zero for the assignment.

Students are expected to do the work required for assignments on their own. Asking other instructors at the JU clinic the staff, or other students to assist in or do any part of the assignment for them will negatively affect their grade on that assignment. The course instructor is the person the student needs to talk to if s/he has any difficulties pertaining to an assignment or project and is strongly encouraged to schedule an appointment with the instructor if such difficulties arise during the semester.

Course materials prepared by the instructor, together with the content of all lectures and review sessions presented by the instructor are the property of the instructor. Video and audio recording of lectures and review sessions without the consent of the instructor is prohibited.

Any forms of academic misconduct will be handled according to the University of Jordan guidelines.

E- Grading policy:

Grading for this course will be determined based on the accumulation of points for a variety of assignments and exams. All work will be evaluated on the completeness, organization, clarity of information, and the integration and application of the material.

F-Available university services that support achievement in the course:

The University of Jordan provides many services to support the social, health, and mental well-being of students in general and students with disabilities in specific. Students are advised to visit the Faculty of Student Affairs to learn more about those services. If you are a student with a disability for which you may request accommodations, please notify the staff of Services for Students with Disabilities (Faculty of Students Affairs) as soon as possible. Please also contact the instructor as soon as possible (email is acceptable) so the appropriate accommodations for this course can be made.

25 References:

Required book (s), assigned reading, and audio-visuals:

Dirette, D. & Sharon A. Gutman, S. (2021). *Occupational Therapy for Physical Dysfunction* (8th Edition). Wolters Kluwer, Philadelphia.

Trombly, C. , & Radomski, M. (Eds) (2014). *Occupational therapy for physical dysfunction (7th ed.)*. Baltimore, MD: Lippincott Williams & Wilkins.

3. Recommended books, materials, and media:

Edmans, J. (2010). *Occupational Therapy and Stroke*. Wiley-Blackwell

Sames, K. (2005) *Documenting Occupational Therapy Practice*. New Jersey: Pearson

Crepeau, E., Cohn, E., & Schell, B. (Eds) (2003). *Willard & Spackman's Occupational Therapy* (10th ed.) Baltimore: Lippincott Williams & Wilkins.

26 Additional information:

None

Name of Course Coordinator: Salma Abduljaber
2024

Signature: S.A Date: 8-10-

Curriculum Committee of /Department: Majd Jarrar Signature: -----MJ---

Head of Department: ----- Majd Jarrar ----- Signature: -----MJ---

Head of Curriculum Committee/Faculty: ---- Prof Kamal Al Hadidi ----- Signature: KH-

Dean: ----- Prof Kamal Al Hadidi ----- Signature: -----KH-----

Clinical Reasoning in Intervention Tool Selection (10 points)

During your rotation in the **Neurological** clinical training, you will work in a group of **3–4 students**, you are required to choose one of the problems that you notice in the patients (neuro cases) you deal with and design an appropriate intervention tool for this problem.

Submission Date: 30/10/2024

Assignment: Preparing an Intervention Tool for Neurological Disorders	
<u>Assignment description:</u>	<p>In groups of 3-4, students are required to create a tool for patients with neurological disorders that targets improving the patient's performance skills (i.e. motor skills, sensory skills, and motor skills).</p> <p>Students should submit the following along with the tool:</p> <ul style="list-style-type: none"> - A report that includes (Tool description, tool goals, and how to grade up and down the activity) - Instruction sheet on how to use the tool (lamine the instruction sheet, include the university logo, and list your names).
<u>Assignment objective:</u>	<ol style="list-style-type: none"> 1. Apply the basic procedures of the main intervention approaches used with neurological disorders. 2. Develop the use of analytical, problem-solving skills and creativity when thinking of solutions for problems encountered in an OT setting.

Rubric	Sub-elements of evaluation	Grade 10 %	
Richness & comprehensiveness of the tool	Addressing the therapeutic benefits and goals of the tool in occupational therapy (suitable for the patient)	1	
Rational and illustration	Demonstrate with which type of conditions/diagnoses it can be used	1	
Report	Clarity of: no typos, clear font, etc.	0.5	
	Organization: proper use of headings & Subheadings	0.5	
	Include all components (1 page) (tool description and how to use it, 2 goals, grading up and down.)	2	
	Applicable, Durable, and use friendly	2	

Characterizes & quality of the FABRICATED Intervention tool	Professional: very similar to a manufacturing assessment tool	1	
Creativity	Variety and multiplicity of ideas presented. Is there something special/new/original/novel about your work	1	
Discussion	Discussing the tool and the tool report with the instructor	1	

Practical video Exam

You will be provided with information about the patient, including the medical record, and watch some videos about the patient. Therefore, you will fill in the needed details.

In the first part, you fill in the demographics, diagnostic information, and the main assessment methods you will use with the patient. As for the second part, you will be provided with some initial evaluation and assessment forms conducted on the patient, and based on that, you will build the treatment goals. Then, you will watch one of the patient's sessions to write SOAP notes for the determined session First part:

After watching the videos and reading the medical record write the following section:

I. Demographics and diagnostics: (2 points)

A. Client name

B. Age and gender

C. Client diagnosis(es):

1. Primary (reason for referral)

2. Secondary (other important diagnoses/comorbidities)

3. Precautions/contraindications (related to medical condition, equipment, safety)

D. Brief medical history (major hospitalizations, surgeries, medications, medical complications)

II. Occupational profile – (10 points)

Fill out the patient's occupational profile (Use the AOTA Occupational Profile Template) based on what you got from the videos and initial information.



“The occupational profile is a summary of a client’s (person’s, group’s, or population’s) occupational history and experiences, patterns of daily living, interests, values, needs, and relevant contexts” (AOTA, 2020, p. 21).

III. Assessment Methods and Evaluation: 10points

What are the Methods of assessment and assessment tools you will use with the patient? and how they are relevant to OT (performance areas, Client factor ...)

[Please attach any assessment forms you want to use and justify why you want to use it]

Methods of assessment	Justify why you chose these methods and tools	Relate to OT (occupations, Performance patterns, performance skills skills/ Client Factors, and context)

Sections III: 1 page

Second Part:

After reviewing the initial evaluation of the patient and watching the selected session complete the following section:

IV. Goals: 8 points

- A. Identify two long-term goals for this client.
 - Goals should be
 - Relevant: to the client’s condition & set priorities
 - Time: # of sessions & date of completion



- Verb used (Clear & understandable)
- Measurable: Method of measuring progress
- Achievable & Realistic

B. Identify three short-term goals for each long-term goal (six total).

- Goals should be
 - Relevant: appears as a graded plan for achieving the long-term goal
 - Time
 - Verb used (Clear & understandable)
 - Measurable: The method of measuring progress presents an appropriate
 - The method of measurement is the same as that used in long-term goals

LTG	STG
1. (Treatment approaches)	1.
	2.
	3.
2. (Treatment approaches)	1.
	2.
	3.

Sections IV: 1 page

Notes:

The number of pages does not exceed 6 pages.



The University of Jordan

Occupational Therapy Department

Clinical Supervisor Assessment Form (20 Points)

Student name:	Rotation:
Clinical supervisor/TA name:	Site:

• Grand total: _____/104

Final Grade: _____/20

Evaluation scale (For the final grade):

9 – 10: Poor

11 – 12: Inadequate performance

13 – 14: Below level of competence

15 – 16: Competence

17 – 18: Above level of competence

19 – 20: Outstanding

For the following questions, please check the appropriate box using the following criteria:

- Inadequate performance (0): Unable to identify and perform stated tasks.
- Below the level of competence (1): Inconsistently performs stated tasks.
- Competence (2)
- Above the level of competence (3): Performs all stated tasks consistently.
- Outstanding performance (4): Consistently and skillfully performs stated tasks, beyond expectations.

A. Assessment

	Inadequate performance (0)	Below the level of comp. (1)	Competence (2)	Above the level of comp. (3)	Outstanding performance (4)
1. Select the appropriate assessment methods for clients that integrate clinical reasoning, evidence-based practice, and effective use of resources					
2. Create an environment appropriate to assess the client					
3. Demonstrates effective verbal and non-verbal communication skills when assessing the client					
4. Obtain additional information from the appropriate persons/records					
5. Interprets the results of the assessment in terms of occupational function and dysfunction					
6. Demonstrates good safety awareness*					
Total score: /24					

*A safety score of “inadequate performance” or “below the level of competence” will result in 0 total score

B. Intervention Planning, Implementation and Evaluation:

	Inadequate performance (0)	Below level of comp. (1)	Competence (2)	Above the level of comp.	Outstanding performance (4)

				(3)	
1. Plans long term and short-term objectives in conjunction where appropriate					
2. Demonstrates ability to establish treatment priority					
3. Select appropriate media and intervention techniques that integrate clinical reasoning, evidence-based practice, and effective use of resources					
4. Arrange equipment/materials to facilitate a smooth flow of the session					
5. Demonstrates effective implementation of intervention					
6. Provide patient and family education when appropriate					
7. Demonstrates good safety awareness*					
8. Involve the client in treatment planning decisions by communicating rationale for the intervention program					
9. Ongoing evaluation for intervention outcomes, and identifies when the intervention program should be modified or discontinued or has met client goals					
Total score: /36					

E. Professional Behavior:

	Inadequate performance (0)	Below level of comp. (1)	Competence (2)	Above the level of comp.	Outstanding performance (4)
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				(3)	
1. Demonstrates initiative and active participation while in site					
2. Maintain a therapeutic relationship with the client and caregiver and respect patient confidentiality					
3. Adheres to dress code					
4. Understand the limits of own abilities					
5. Manages own time and workload effectively					
6. Responds positively to constructive feedback					
7. Using professional terminology and abbreviations during verbal and written communication					
8. Improves the current level of skills and knowledge by independently participating in the learning experience					
9. Communicates effectively with clinical supervisors and interprofessional teams, clients, and communities.					
10. Interprets occupational therapy to others according to their level of interest and understanding					



11. Attendance and punctuality					
Total score: /44					

* Not complying with professional, ethical, and institutional policies and procedures with result in a 0 total score for professional behavior