



Jordan University of Science and Technology
 Faculty of Applied Medical Sciences
 Department of Rehabilitation Sciences
 First Semester
 Course Syllabus

Course Information	
Course Title	Occupational Therapy for Children 1 Practical
Course Code	OT 347
Prerequisites	OT 345 or parallel
Time	-
Place	Laboratory: OT lab. # 2
Course coordinator	Dr. Mohammad S. Nazzal, PhD, OTR/L
Office Location	New AMS Building, First floor
Office Phone #	7201000 ext. 26921
E-mail	msnazzal@just.edu.jo
Teaching Assistant(s)	TBA

Course Description	
<p>This course aims to familiarize the students with the scope of occupational therapy theory and practice in working with children with special needs. The students will understand normal and abnormal development of children and how it relates to occupational therapy interventions. The course also provides the students with practical training skills in this area (both pre-clinical laboratory and actual OT sessions observations). In the lab section of this course, students will learn how to integrate theory into practice when dealing with children with special needs and their families; specifically, in terms of evaluation and treatment.</p>	

Textbook	
Title	Occupational Therapy for Children
Author(s)	Jane Case-Smith
Publisher	Mosby
Year	2010
Edition	6 th (5 th edition is acceptable, 6 th edition is preferable)
Other references #1	Pediatric skills for Occupational Therapy Assistants (2 nd Ed.), J. W. Solomon & J. C. O'Brien
Other references #2	Roley, S. S., DeLany, J. V., Barrows, C. J., Brownrigg, S., Honaker, D., Sava, D. I., et al. (2008). Occupational Therapy Practice Framework: Domain & Process, 2nd edition. American Journal of Occupational Therapy, 62(6), 625-683.
Other references #3	Case-Smith, J., O'Brien, J. (2010). Occupational therapy for children (Vol. 6 ed). St. Louis, MO: Mosby-Year Book.

Assessment		
Assessment	Expected Due Date	Percentage
Laboratory First Exam (practice)	TBA	25%
Laboratory Weekly Log Book	TBA	10%
Laboratory Second exam (practice)	TBA	25%
Final Exam (practice)	The end of the semester	40%

Learning Outcomes: Upon successful completion of this course, students will be able to		
	Related Objective(s)	Percentage
1	Explain how individual systems and the environment contribute to a child's occupational performance in the first 10 years of life.	10%
2	Describe the development of postural control systems and the influence of that development on gross and fine motor development.	5%
3	Identify the dimensions of concern in pediatric occupational therapy evaluation.	15%
4	Apply occupational therapy frames of reference for the prevention of psychosocial dysfunction in children and adolescents.	15%
5	Describe general and specific intervention strategies and approaches pertaining to children and occupational therapy.	10%
6	Describe the incidence, signs and symptoms, causes, and pathologic conditions of common medical diagnoses in children.	10%
7	Understand and apply principles of occupation-based; family centered practice.	20%
8	Apply theory and evidence into practice when working with children with special needs.	7.5%

Teaching & Learning Methods
<ul style="list-style-type: none"> • Power point presentations by the course coordinator or invited lecturers. All course material and communications will be conducted via E-learning link (www.just.edu.jo). • Class discussion • Laboratory: selected assignments (within university campus and outside).

Additional Notes

Statement on Professionalism: Professional behavior is expected of students at all times. Attitude and professional behavior are a minimum criterion for passing this class. Repeated lack of professional behavior will result in failure of this course. Examples of unprofessional behavior include but are not limited to: missing classes, tardiness, lack of attention for a speaker, talking to others during lecture, passing food during lecture, leaving a lecture prior to its completion without prior authorization of the instructor, working on other class material during class, inappropriate dress for labs, and sleeping during class.

Communication with instructor: Electronic-mail is the best way to reach me as I consistently check it. However students still can use the above listed phone number.

Cell phone and pagers: Please do not use cell phones or pagers in class. If you are depended upon for anticipated emergencies please put cell phones on vibration mode and answer the phone outside the classroom.

Attendance: Attendance will not count for points in this class, however attending the lectures and labs will greatly enhance your grade. The student is responsible for any information discussed in lecture and lab sessions. It is **imperative** to attend all classes!

Absences: All absences will be entered electronically into the University site. According to Student Manual (Item 8: B, C & D), students are not allowed to be absent for more than 10% of lectures without any official excuse (and more than 20% with an official excuse). If a student exceeds either cases, he or she will not be allowed to sit for future course exams and will earn the least possible grade for the course (35%), unless the student had already withdrew from the course (according to item 13: B). Student will be banned from the course after electronic notification from the university through student e-mail.

Make-up (including assignments) work will be granted for excused absences only:

- Serious illness (doctor's note required)
- Official university activities (with proper documentation)
- Extenuating circumstances (PRIOR approval should be obtained or direct contact made with the instructor within 24 hours)

Group discussions are highly recommended however it's crucial for each student to submit individual assignment, unless I indicate otherwise.

The student has one week from the time any test, assignment, or lab summary is returned to the class to appeal the grade.

The instructor reserves the right to make changes in the above syllabus at any time. The student has the right to be informed of any changes

Feedback:

Concerns or complaints should be expressed in the first instance to the course instructor. If no resolution is forthcoming then the issue should be brought to the attention of the Department Chair and if still unresolved to the Dean. Questions about the material covered in the lecture, notes on the content of the course, its teaching and assessment methods can be also sent by e-mail to the following address msnazzal@just.edu.io.

Laboratory Plan Schedule

Week	Title of the lab	Lecturer
1	Introduction to the course	Dr. Nazzal
2	children's normal developmental milestone	Dr. Nazzal
3	Normal and abnormal reflexes. Postural control	Dr. Nazzal
4	Theory of Sensory Integration (SI)- video	Dr. Nazzal
5	Theory of Sensory Integration (SI) - exercises	Dr. Nazzal
6	Visual perceptual skills	Dr. Nazzal
7	Visual perceptual skills	Dr. Nazzal
8	Hand functional assessments	Dr. Nazzal
9	Hand functional assessments	Dr. Nazzal
10	Prewriting and hand writing skills	Dr. Nazzal
11	Assessment of play and Playfulness	Dr. Nazzal
12	Presentations	Dr. Nazzal
13	Presentations	Dr. Nazzal
14	Week of final lab Examination	Dr. Nazzal

Occupational therapy (OT) is the use of assessment and intervention to develop, recover, or maintain the meaningful activities, or occupations, of individuals, groups, or communities. It is an allied health profession performed by occupational therapists and occupational therapy assistants (OTA). OTs often work with people with mental health problems, disabilities, injuries, or impairments.

The Occupational Therapy Session. The first thing the therapist does is evaluate your child. They usually do this with input from you and your child's teachers. During the evaluation, the therapist will look at how ADHD affects your child's: Schoolwork. Social life. Home life.Â Some children with the condition pull away from too much stimulation. Others crave even more. They're the ones who can swing and spin endlessly. Occupational therapists use a technique called sensory integrative therapy to help kids with ADHD who have sensory processing disorder. In this technique, the therapist helps to reorganize the child's sensory system, using: Deep pressure, such as massage or the use of a weighted vest or blanket.