

SYLLABUS

ON

**REHABILITATION THERAPY ASSISTANT
COURSE**

**REHABILITATION COUNCIL OF INDIA
2004**

**(Statutory Body under the Ministry of Social
justice and Empowerment)**

**B-22, Qutub Institutional Area
New Delhi – 16**

E-mail: rehabstd@nde.vsnl.net.in

Web: www.rehabcouncil.nic.in

TABLE OF CONTENTS

		PAGE NO.
1.	INTRODUCTION	3
1.1	Background	3
1.2	Rationale	4
1.3	Programme aim	4
1.4	Entry Requirements	5
1.5	Structure and Duration	5
1.6	Holidays	6
1.7	Expected Competencies	6
2.	ORGANISATION OF COURSES	10
2.1	Introduction	10
2.2	Syllabus	10
2.3	Role of clinical Practise	11
2.4	Teaching Learning Strategies	11
2.5	Arrangement of Programme Hours	11
3.	ORGANISATION OF TRAINING PROGRAMME	12
3.1	Staffing	12
3.2	Student Support Services	13
3.3	Assessment of Student Performance	13
3.5	Programme Evaluation	15
4.	PROGRAMME MODULES	15
4.1	Core Modules	15
4.2	Specialised Modules	26
4.3	Integration/Clinical Practise Modules	43
4.4	Supporting Modules	46
5.	TEACHING MATERIAL	47

INTRODUCTION

1.1 Background

According to the World Health Organisation (WHO), 0.5% of population of any country need assistive devices¹. This means that in India alone, about 5 million people with disabilities need some kind of assistive devices. A further 5 million also need therapy to enhance their mobility and functional independence to lead a quality life. In any country the majority of people with disabilities have problems with mobility. Mobility is a birthright but the majority of persons with disabilities lead an isolated life due to lack of rehabilitation services, society's attitudes and environmental barriers. Even today, the vast majority of people with disabilities cannot access even basic rehabilitation services despite the incremental progress made in the past 25 years. According to Government of India statistics, only 10% of population who need such assistance have been reached so far². The majority of people who need such services, are poor and cannot access rehabilitation service due to socio-economic factors.

Mobility is the first step to access basic rights – access to food, shelter, education, job/income and equal opportunities – equal citizenship. The most important components in the restoration of mobility are therapy services – both physical and occupational therapy, assistive devices such as orthoses, prostheses, mobility aids and assistive /developmental aids. **Rehabilitation Therapy, Orthoses and Prostheses** plays a major role in enabling a person with a disability to change from being:

- **Immobile to Mobile**
- **A Passive Receiver to an Active Contributor**
- **Isolated to Included**

Rehabilitation helps a child to go school or help an adult to go for skill training or income generation activities – further steps towards equality.

Disability and Poverty

It is known that the prevalence of impairments is greater in low-income countries and obviously in low income groups. Disability also causes an increase in poverty through the high cost of rehabilitation services and the reduced opportunities for paid work for people with disabilities. Rehabilitation is still not a part of primary health care though it should be. The State is responsible for providing rehabilitation service but statistics say only 5-10% of persons with disabilities access rehabilitation facilities³.

The ultimate aim of Rehabilitation services should be to make sure that *every* person with disability – whether living in the countryside or in a city, whether rich or poor, whether man or woman, whether child or adult, with or without education, whether civilian or ex-combatant, whether disabled from war or by birth, accident or disease, whether well-informed about the rights to be assisted or not – that every person is given the same opportunity to access rehabilitation services. To achieve this, there needs to be an increased number of professionals of various levels.

NEED OF THE HOUR

The need of the hour is to train rehabilitation professionals/personnel or paramedicals in three levels (Post- Graduate, Graduate and Diploma/Certificate) to meet the demand at National Level, regional level, state level, district level and if possible, even at block or Taluka level, There is a need to create rehabilitation services and facilities at all levels of different magnitude and with different kind of trained professional/personnel almost like a cascade system. Such training has to be needs-based, of different duration and must give equal importance to both the development of knowledge and skills and the development of positive attitudes.

The professional must:

Respect persons with disabilities especially those who are Poor

¹WHO guidelines for training personnel in developing countries for prosthetic & orthotic services, 1990, Geneva

²District Rehabilitation Report: Ministry of Social Justice & Empowerment India (2001)

³Annual Report 1999 – 2000 Ministry of Social Justice & Empowerment, India

1.2 Rationale

The majority of disabled population are in rural areas. It is still difficult to find like minded therapists who are willing to work in rural areas especially for the poor, though India produces the largest number of therapists in the world. To overcome the huge need for therapists, the 1 Year Rehabilitation Therapy Assistant Training Programme is a step forward for people with disabilities.

India alone needs 100,000 therapist/therapy assistants (1:100) – 1 trained person for every 100 people who need therapy⁴ and 20,000 P&O professional (1:500) – 1 trained person for every 500 people who need assistive devices. India has so far developed only 5% of the required manpower. The problem is more acute in many low income countries due to the non-availability of training programmes.

In a country like India, there is a need to train rehabilitation professionals/personnel at three levels (Post-Graduate, Graduate and Diploma/Certificate) to meet the demand at national, regional or provincial, state, district level and if possible, even at block or Taluk level.

⁴WHO guidelines for training personnel in developing countries for prosthetic & orthotic services, 1990, Geneva

1.3 Programme aim

The programme aims at, in particular to meet the needs of People with Disabilities in low income countries who are currently unable to access rehabilitation services. As a first step towards meeting this need the programme is a development towards a second generation of Rehabilitation Therapists with the aim that on completion of the programme students are able to (under supervision) appropriately assess and provide therapy intervention for people with disabilities. They will be able to reassess and evaluate their intervention, document all the above and work within their limitations.

The training is generic and includes relevant aspects of Physiotherapy and Occupational Therapy as well as basic Orthotics and Prosthetics so that they are able to carry out simple repairs and maintenance of appliances in the absence of Prosthetist & Orthotist/ Orthopaedic Technologist/Technician.

Students will be aware of how to refer the persons with disabilities to other rehab professionals as well as other Health and Social Services. Most of the major physical disabilities found in India and other low income countries are included in the training syllabus. This includes management of such disabling conditions as Polio, Cerebral Palsy, Spina Bifida, Spinal Cord Injuries, Amputations, Congenital Birth Defects, Arthritis, Muscular Dystrophy and Developmental Delay. The emphasis on training will be on holistic intervention, concentrating on functional independence and social integration, home-based therapy using appropriate technology with a focus on early identification and early rehabilitation.

1.4 Entry Requirements

Candidates should:

- Have a minimum of 12 years of school OR have completed 'A' level education. Preference will be given to persons with disabilities especially women with disabilities. It is better to have students with 12 years of schooling as this could give students the opportunity to apply for higher category training programmes in future.
- Be aged 18 years minimum.
- Be able to read, write and understand spoken English at a basic level.
- If possible, spend about 3 to 4 months at the organisation where students will be working on completion of their training, prior to coming for the training, preferably in the areas of rehabilitation or Community Based Rehabilitation (CBR) programme.

Preference is given to persons with disabilities to be sponsored for training especially women with disabilities.

1.5 Structure and Duration

The 1-Year Rehabilitation Therapy Assistant Training Programme comprises mainly of 3 interlinked elements. These are:

- Theoretical understanding.
- Supervised practical training and clinical experience in the assessment and therapy intervention to People with Disabilities.
- Communication skills with the needs of the PWD, their families, communities and their role with other professionals in mind.

These 3 elements are developed together throughout the course. The emphasis is on the practical application of skills and the integration of all 3 elements. All aspects of the programme are taught in so far as possible through participatory, practical methods to give the students maximum practical experience in rehabilitation therapy using resources available in their local community. Each student's individual learning needs are considered in conjunction with the needs of their specific context on completion of the course.

The programme is of 12 months duration and is based on a 47 Week teaching year with each week having 36 guided learning hours. There are 2 semesters of 22 and 23 weeks duration respectively with a 2 week holiday in-between.

As part of the training programme there are 2 field placements in the rural-based organisations. The first is in the first semester and is of 2 weeks duration. The second is in the second semester and is of 3 weeks duration.

Module refers to a specific topic or group of connecting topics that are evaluated together.

Credit refers to the units/points awarded to each module by Rehabilitation Council of India (RCI). One credit is face to face teaching learning situation as per Rehabilitation Council of India (RCI) standardized and approved courses at Diploma level.

The programme is made up of 4 modules i.e. Core Module, Specialised Module, Integration/Clinical Practise Module and Supporting Module with each module is comprises of different set of papers and having a credit value.

There are a total of 44 credits attached to each 1-year course. Modules have a varying number of hours, requirements and importance and the credits awarded to each module reflect this. The student's performance in all modules except the Supporting modules are evaluated. Students are required to complete and pass all modules in order to receive Record of Achievement (Pass) certification.

1.6 Holidays

Students are entitled to the following holidays:

- a) 12 days as winter vacation in the 6th month.
- b) 13 days of public holidays.
- c) All 2nd Saturdays & Sundays as a holiday.

1.7 Expected Competencies

OVERALL FUNCTIONS OF THE REHABILITATION THERAPY ASSISTANT

On successful completion of the course the Rehabilitation Therapy Assistant under supervision of Rehabilitation Therapists (Physiotherapist and/or Occupational Therapist) will be able to:

1. Communicate effectively with people with disabilities and their families/carers/ community as well as with other team members.
2. Carry out a basic assessment of persons with a disability in order to identify individual priorities, the main rehabilitation problems and the needs for rehabilitation.
3. Set objective and realistic goals, devise an appropriate treatment plan and ensure regular re-assessment and evaluation of results, with appropriate modifications of goal setting.
4. Carry out effective rehabilitation at community level, in collaboration with other professionals, persons with disability and carers.
5. Inform and build on the knowledge of persons with disability, their family, community members, other CBR team members and the population in general on disability and rehabilitation issues, with appropriate means and documentation.

6. Work collaboratively with the rehabilitation team and if required manage the day-to-day activities of the therapy unit and support field staff to implement rehabilitation programmes at field level.
7. Build a network with all possible professionals in the area/region so as to increase the possibility of referral to the required level whenever necessary

Expected Tasks of the Rehabilitation Therapy Assistant

The expected competencies of the Rehabilitation Therapy Assistants relate to three major areas of professional tasks:

- Technical tasks
- Administrative tasks
- Communication tasks

TECHNICAL TASK

General Assessment

1. History taking and assessment of client and their family's priorities.
2. Basic assessment of general health conditions.
3. Basic assessment of impairment, disability or handicap.
4. Basic assessment of Activities of Daily Living and needs for improvement.
5. Basic assessment of functional abilities including mobility and areas for improvement.

Specific Assessments

6. Assessment of range of movement in the major joints of the lower limb, trunk and upper limb.
7. Assessment of muscle power of the main muscles of lower limb, trunk and upper limb.
8. Assessment of sensation in the limbs.
9. Assessment of muscle tone, balance and coordination.
10. Basic assessment of cognitive and perceptual problems.
11. Basic assessment/evaluation of common deformities/secondary problems.

Programme Planning

12. Identify problem list, needs and determining client's and carer's priorities.
13. Collaboratively set treatment goals and objectives with PWD, carers and other members of the rehabilitation team.
14. Collaboratively plan a treatment programme with the PWD, carers and other members of the rehabilitation team.

Specific Treatment Modalities

15. Design and implement a treatment programme to develop muscle strengthening.
16. Design and implement a treatment programme to maintain range of motion by:
 - Positioning,
 - Range of motion exercises
 - Therapeutic activities
17. Design and implement a treatment programme to increase range of motion by:
 - Stretching exercises
 - Manual postures
 - Mechanical postures

- Therapeutic activities
18. Design and implement basic massage techniques.
 19. Design and implement a programme to improve respiratory function by:
 - Breathing exercises
 - Breathing activities
 20. Design and implement a programme to facilitate normal muscle tone and normal movement.
 21. Design and implement a programme to improve balance.
 22. Design and, implement a programme to improve coordination.
 23. Design and implement an assistive and adaptive treatment programme to improve independence in activities of daily living with:
 - Bathing,
 - Dressing
 - Feeding
 - Toileting
 24. Carry out safe moving and handling and facilitate functional transfers.
 25. Design and fabricate aids & accessories like:
 - Developmental aids.
 - Assistive & Adaptive devices for ADL.
 26. Identify the need for and suggest home adaptations and devices to improve accessibility.
 27. Identify the need for orthopaedic appliances/mobility aids and refer on appropriately.
 28. Take the appropriate measurements for and suggest mobility aids/walking aids.
 29. Carry out gait training with appliance/walking aids.
 30. Train in the functional use of orthopaedic appliance.
 31. Carry out a basic check out of all orthopaedic appliances & carry out basic repairs.

Management of Specific Groups

32. Design and implement a programme to facilitate normal development, mobility and self help skills in children.
33. Advise and help people with visual problems and their families.
34. To advise and help people with speech and/or hearing problems and their families.
35. Design and implement a basic therapy programme for people with mental illness and their families.
36. Design and implement a basic therapy programme for people with mental retardation and their families.

Social Integration

37. Identify and utilise resources in the community for the rehabilitation of persons with disability.
38. Facilitate and promote the integration of person with disability into their community and society.
39. Promote the participation of people with disabilities in the recreational and social activities within the community.

Work/ Education

40. Help children with disabilities go to school.
41. Advise people with disabilities and their families and provide rehabilitation that will facilitate suitable income generation/job opportunities.

ADMINISTRATIVE TASKS

1. Record client personal information.
2. Record assessment and problem list.
3. Record treatment goals.
4. Record rehabilitation implementation details (who, how, when, how much, etc...)
5. Record each intervention.
6. Regular record re-assessment & treatment progress.
7. Ensure safety of disabled person and self throughout treatment.
8. Fix and record appointments for clients & carers.
9. Monitor and record rehabilitation equipment & materials (stock).
10. Plan and place orders for rehabilitation equipment & materials.
11. Maintain statistics.
12. Respect discipline rules.
13. Respect management directives.
14. Maintain information flow to management, colleagues and other professionals.
15. Organise rehabilitation therapy activities.
16. Maintain rehabilitation therapy premises condition & cleanliness.

COMMUNICATION TASKS

1. Communicate effectively with all persons with disability.
2. Communicate effectively with the families and carers of PWD.
3. Communicate effectively with members of the community, community groups and leaders.
4. Communicate effectively with other rehabilitation professionals.
5. Refer persons with disability to other professionals whenever necessary.
6. Work as a team member with all other staff within the rehabilitation team/organisation.
7. Provide necessary information to the population regarding health, disability and rehabilitation issues.
8. Provide information, advice and training to people with disabilities and their carers.
9. Provide information, advice, training and support to field staff to carry out community level interventions.
10. Prepare presentation on technical and rehabilitation issues to relevant group.

References

- Guidebook of Credit guidelines of Rehabilitation Council of India (RCI)
- Guidelines for training personnel in developing countries for prosthetic and orthotic services (1990). WHO/RHS/90.1 – Geneva: WHO
- Diploma in Basic Developmental therapy Course for children with CP and other Neurological Handicap - RCI
- Education of Multi Rehabilitation Worker in India- RCI (Revised in 1995)
- Diploma in Special education (Hearing Impairment) – Based on Credit System – RCI 2003
- Post Graduate Diploma course in CBR – RCI
- WHO guidelines for training personnel in developing countries for prosthetic & orthotic services, 1990, Geneva
- District Rehabilitation Report: Ministry of Social Justice & Empowerment India (2001)
- Annual Report 1999 – 2000 Ministry of Social Justice & Empowerment, India

SECTION 2 - ORGANISATION OF THE COURSE

2.1 Introduction

The syllabus for the Rehabilitation Therapy Assistant has been organised in a modular format. To this end, theoretical and practical modules run side by side with integrative and clinical practise to facilitate the integration of the learning experiences of the students.

2.2 Syllabus

Module	Topic	Theory Hours	Credits Theory	Practical Hours	Credits Practical	Total Hours	Total Credits
CORE MODULES						324	12
Paper 1	General Anatomy and Physiology	36	2	108	3	144	5
Paper 2	Personal/Professional and Community Studies Communication Counselling Personal and Professional Development Organisation and Documentation Workshop Management Training Skills Disability and Development Primary Health Care Community Based Rehabilitation (CBR)	72	4	108	3	180	7
SPECIALISED MODULES						504	17
Paper 3	Clinical Studies (Disabling conditions)	54	3	144	4	198	7
Paper 4	Applied Rehabilitation I) Rehabilitation Therapy II) Complementary or Associated Rehab (Orthotics and Prosthetics)	54	3	252	7	306	10
INTEGRATION/CLINICAL PRACTISE MODULES						540	15
Paper 5	Clinical Placement and Integrative Studies	0	-	360	10	360	10
Paper 6	Rural Placements I) -2 weeks II) - 3 weeks	0	-	180	5	180	5
SUPPORTING MODULES						84	-
TOTAL		216	12	1152	32	1452	44

2.3 The Role of Clinical Practise

By the end of the programme the students will be able to integrate theoretical and practical learning into the community. Throughout the programme opportunity will be provided to facilitate this approach with the emphasis on experience in the field. Both the experience in therapy unit and CBR project areas as well as the rural placement in a rural environment provide opportunity for students to apply basic concepts and principles to practical situations in the community. Students become more proficient in the application of rehabilitation techniques and develop and demonstrate positive professional attitudes in the community.

2.4 Teaching - Learning Experiences

The training programme will utilise a participatory approach to learning which will provide students with opportunities to develop the knowledge, attitudes, and skills necessary to carry out their role as Rehabilitation Therapy Assistants on completion of the course.

Special attention is placed on the development of the positive attitudes towards Persons with Disabilities (PWDs) and their eventual performance in their own work environment.

Among the teaching-learning strategies (methods) which will be utilised are:

- Field and Workshop experience
- Practicals
- Case studies
- Demonstrations
- Participative class session (lecture)
- Self study
- Questions and answers
- Role play and Simulations
- Student presentations
- Projects and group work

Among the above-mentioned methods, some are more suitable for teaching knowledge, others are more suitable for developing or changing attitudes and some are more appropriate for teaching skills.

The emphasis both throughout the training and during the assessment of the students' learning outcomes is on the basic principle of problem solving. An integrative approach has been added to the syllabus to provide a specific forum where problem solving can be applied. As a strategy, problem solving presents complex issues to students and prepares them to apply their knowledge and experience to situations, which will arise in their work. The utilisation of this approach facilitates learning and enhances the skills of the student.

2.5 Arrangement of programme hours.

TOPIC/ACTIVITY	HOURS
Applied Rehabilitation (practical therapy sessions)	306
Clinical Placement & Integrative studies	540

Clinical Studies	198
Other core and supporting modules	408
Evaluation	102
Recreational & other activities	66
TOTAL HOURS	1620

SECTION 3 - ORGANISATION OF TRAINING PROGRAMME

3.1 Staffing

Programme Coordination

A rehabilitation professional with extensive clinical experience as well as experience as a tutor and a clinical supervisor is employed as Programme Coordinator. His/her responsibilities include strategic planning, implementation of the curriculum, monitoring and evaluation of the programme.

Tutors

The main teaching team is made up of Occupational Therapists, Physiotherapists, Orthotists, Prosthetists, CBR specialists, and Administration staff. All teaching staff maintains an active role in their particular field in addition to their role as tutors. In this way they continue to have up-to-date clinical experience to share in the training. Additional resource persons for identified curriculum areas are drawn from other sectors, agencies, organisations and national institutes. These include medical doctors, development workers, social workers and rehabilitation professionals.

Field Supervisors

During their clinical practise in the rural-based organisations students are supported and supervised by the experienced Therapists and Orthopaedic Technicians who are based there.

Personal Guides (Mentors)

Personal Guides are made up of institute Staff other than trainers with appropriate skills.

3.2 Student Support Services

Personal Tutors

Each student will be allocated a personal tutor who will provide educational and learning support throughout the course. Their role is:

- To provide general learning support.
- To support the student in the development of their study skills.

- To provide direct learning support with specific areas that the student may be struggling with or if its more appropriate, guide the student in accessing additional support from a different institute Staff member.

Personal Guides

Personal guides are recruited from institute Staff who are not part of the key training team. Each student will be allocated a personal guide for at least first 3 months after their arrival. After this time the system will be evaluated. The role of the personal guide is:

- To provide support for the students when they first arrive to institute by helping them to settle in to the new environment.
- To work with the student to help them cope with personal and practical issues especially during the initial phase of their stay at institute Staff.

3.3 Assessment of student performance

There are 2 elements to the assessment of students' performance within the training programme. These are formal and informal.

Informal Assessment

Informal assessment is designed to give the trainers and students feedback on their level of understanding and skill. This is carried out continuously throughout the year and takes the form of self and peer assessments, class assignment, tests and project. This enables the trainers and students to focus the students learning on their areas of weakness.

Formal Assessment

Formal assessment of student's performance is aimed at identifying whether they have achieved an acceptable level of performance in all the areas outlined in the expected tasks of a Rehabilitation Therapy Assistant (see section 1.7).

Students are expected to complete and pass all modules except supporting module in order to receive Record of Achievement (Pass) Certification. Each module is evaluated according to its content, its specific objectives and the number of credits it is allocated. The methods used include the following:

- Written and Oral Exams
- Practical exams
- Case Presentations
- Practical Case Studies
- Poster presentations
- Projects/Portfolios
- Reflective Diaries
- Proved competency in specific task

Rural placements modules are evaluated jointly by Training institute Tutor and the field Supervisor in the rural organisation. Where ever possible evaluations are cross-marked by separate trainers to ensure consistency of marking grade. Rehabilitation Council of India aims to provide equal opportunities to all students. Where a student's disability limits their ability to complete a set evaluation for a particular module, a

different evaluation method which will fulfil the requirements of that module will be selected. In this case alternative evaluation methods will be validated by an internal committee comprised of experienced trainers of the training institute.

Failing Students

In the event of a student failing to fulfil the qualifying requirement of a particular module, they will be given a second opportunity to complete the evaluation after a gap of 3 months. Students are allowed a second opportunity to complete an evaluation on up to 4 of the given paper.

In the event of a student failing more than 4 papers at first attempt or failing a second attempt, the student will be considered fail and have to repeat the entire course.

Compulsory withdrawal from the programme

Training institute reserves the right to withdraw a student from the programme compulsorily for the following reasons:

- a) Disciplinary grounds e.g. unacceptable behaviour or professional ethics etc.
- b) Unacceptable academic or clinical performance.

Certification

A Student who has attended the training and completed the requirements for all modules successfully will be qualified as a **Rehabilitation Therapy Assistant** and be eligible to receive a certificate from Training institute to work in the field of Rehabilitation in India. After successful completion of the course, the student will be eligible for registration with **Rehabilitation Council of India**.

Evaluation Structure

Semester 1			
Paper	Name of Paper	Method	Total Marks
Paper 1	Anatomy And Physiology	<ul style="list-style-type: none"> • written exam • Practical test 	100
Paper 2	Personal/Professional and Community Studies	<ul style="list-style-type: none"> • Poster Making • Assignment • Project Work • Case Study • Teaching Session 	100
Paper 3	Clinical Studies	<ul style="list-style-type: none"> • written exam • Practical test • Seminars 	100
Paper 4	Applied Rehabilitation	<ul style="list-style-type: none"> • Checklist of ‘records of achievements’” 	Competency in each task
Paper 6	Rural Placements	<ul style="list-style-type: none"> • Field Assignment • Case Study • Field Supervisor Report 	100
Semester 2			
Paper 2	Personal/Professional and	<ul style="list-style-type: none"> • Project Work 	100

	Community Studies	<ul style="list-style-type: none"> • Case Study • Teaching Session 	
Paper 3	Clinical Studies	<ul style="list-style-type: none"> • written exam • Practical test • Seminars 	100
Paper 4	Applied Rehabilitation	<ul style="list-style-type: none"> • Checklist of 'records of achievements' 	Competency in each task
Paper 5	Clinical Placement	<ul style="list-style-type: none"> • Practical Case Studies • Assignment • Developmental Toy • Learning/Reflective Diary • Project • Aids For ADL 	300
Paper 6	Rural Placements	<ul style="list-style-type: none"> • Field Assignment • Case Study • Field Supervisor Report 	100
TOTAL PAPERS 6		TOTAL MARKS 1000	

3.5 Programme Evaluation

An evaluation team comprising internal and external examiners will evaluate the programme during and at the completion of the training course. The internal evaluators will comprise a core group of teaching co-ordinators from training institute as well as all the students. The external evaluators will comprise experts from the Rehabilitation Council of India.

SECTION 4 - PROGRAMME MODULES

4.1 Core Modules

**Paper 1 GENERAL ANATOMY AND PHYSIOLOGY 144 hours
5 Credits**

Overall Description

In this module the student learns about the basic anatomy of the main body systems and how they work. This module provides a foundation of knowledge that will be applied throughout the rest of the training programme.

Overall Objectives

For the students to develop an understanding of the basic anatomy of the human body and how it works.

Content

Units	Hours
1. Body Parts and Medical Vocabulary	12
2. Physiology (General Body Systems)	18
3. Osteology (Skeletal System)	18
4. Arthrology (Joints)	18
5. Myology (Muscular System)	24
6. Neurology (Nervous System)	18
7. Child Development	18
8. Biomechanics	18
Total	144

Unit 1 BODY PARTS AND MEDICAL VOCABULARY 12 hours

Description

In this unit the student learns to identify the main parts of the body as well as understand and use medical vocabulary.

Objectives

At the end of the unit the student will be able to:

1. Identify the main body parts presented in this unit.
2. Describe the anatomical position.
3. Explain why the anatomical position is important.
4. Apply medical vocabulary for body parts and locations.
5. Apply medical vocabulary for body positions and direction of body movements.

Unit 2 GENERAL BODY SYSTEMS (PHYSIOLOGY) 18 hours

Description

In this unit the student learns the basic anatomy and physiology of the circulatory, respiratory, urinary and digestive body systems. They will also be introduced to the skin, musculo – skeletal and nervous systems.

Objectives

At the end of the unit the student will be able to:

1. Identify the structure and function of the circulatory system.
2. Identify the structure and function of the respiratory system.
3. Identify the structure and function of the urinary system.
4. Identify the structure and function of the digestive system.
5. Identify the structure and function of the immune system.
6. Identify the structure and function of the endocrine system.
7. Identify the structure and function of the skin and identify the systems responsible for movement of the body.
8. Describe the relationship between the different systems.

Unit 3 SKELETAL SYSTEM (OSTEOLOGY) 18 hours

Description

In this unit the student learns about the basic mechanisms of bone growth and repair as well as the specific bones of the human body and their functions.

Objectives

At the end of the unit the student will be able to:

1. Relate the structure of the bones of the body to their function.
2. Explain how normal bone grows.
3. Apply bone growth principles to broken bones and amputations.
4. Identify and describe major bones of the body.
5. Describe the bones of the vertebral column and their properties.
6. Describe the normal curves of the vertebral column
7. Describe the shoulder girdle, ribs and sternum.

Unit 4 JOINTS (ARTHROLOGY) 18 hours

Description

In this unit the student learns about the general structure of a joint, the possible movements occurring in a joint as well as the specific joints of the human body.

Objectives

At the end of the unit the student will be able to:

1. Describe the structure of a synovial joint.
2. Identify major joints of the body and the movements available at each joint.
3. Explain the directions of joint movement
4. State the amount of degrees for different angle measurements.
5. Estimate the amount of movement in a given joint.

Unit 5 MUSCULAR SYSTEM (MYOLOGY) 24 hours

Description

In this unit the student learns about the basic physiological aspect of muscle contraction as well as the specific muscles of the human body.

Objectives

At the end of the unit the student will be able to:

1. Identify different types of muscles
2. Describe what a muscle is made of, how a muscle works and what happens when a muscle is tired.
3. Identify if an action is an isometric, eccentric or concentric muscle contraction.
4. Explain the concept of gravity and how it affects muscle action.
5. Identify specific muscle names, locations and actions.
6. Demonstrate muscle testing techniques.

Unit 6 NERVOUS SYSTEM (NEUROLOGY) 18 hours

Description

In this unit the student learns about the basic physiological and anatomical aspects of the nervous system.

Objectives

At the end of the unit the student will be able to:

1. Identify the difference between the central nervous system and the peripheral nervous system.
2. Indicate the main parts of the brain
3. Identify the difference between a sensory nerve and a motor nerve.
4. Describe the difference between a reflex and a voluntary movement.
5. State the functions of the different spinal cord levels.

Unit 7

CHILD DEVELOPMENT

18 hours

Description

In this module the students will learn about the normal stages of development of a human child from birth to 5 years.

Objectives

At the end of the unit the students will be able to:

1. Describe the developmental milestones of a normal child.
2. Differentiate between motor skills, communication skills and social skills.
3. Understand the importance of these skills in normal development.

Unit 8

BIOMECHANICS OF THE HUMAN BODY

18 hours

Description

In this module student gain a basic understanding of biomechanics that will enable them to understand the basic biomechanics of normal human movement and thereby apply this understanding to their intervention with people with disabilities.

Objectives

At the end of the unit the student will be able to:

1. Explain medical terminology in relation to direction and location
2. Describe gravity and its effect on the human body
3. Demonstrate and describe how levers and forces effect the human body
4. Give a basic explanation of normal human gait
5. Give a basic explanation of abnormal gait/deviations from normal

**Paper 2 PERSONAL/ PROFESSIONAL STUDIES AND
COMMUNITY STUDIES** **180 hours 7 Credits**

Overall Description

This module focuses on both the student's inter - personal skills and their developing professional skills. This is complementary to technical skills and is essential to work in their capacity as a Rehabilitation Therapy Assistant. In this module the students learn about the importance of primary health care for the community they will be working with. They will consider the socio-economic situation of people with disabilities in the community and the link between disability and development. The emphasis in this module is on the deepening of students' understanding of issues around disability and the development of a positive attitude to people with disabilities in society. Through extensive field visits to the local CBR projects students gain practical experience and insight into the needs of the people they aim to help. By accompanying experienced CBR workers into the field they gain an understanding of CBR and their role within the CBR framework.

Overall Objective

In this module students develop self- knowledge and skills in the personal and professional areas that are complimentary to their work as Rehabilitation Therapy Assistant. Students develop an understanding of the health and socio-economic context of people with disabilities in the community and their role and the role of CBR in this.

Content

Units	Hours
1. Communication	18
2. Counselling	18
3. Personal and Professional Development	18
4. Organisation and Documentation	18
5. Workshop Management	18
6. Training Skills	18
7. Disability and Development	24
8. Primary Health Care	24
9. Community Based Rehabilitation	24
Total	180

Unit 1 COMMUNICATION

18 hours

Description

In this unit the student learns about the communication process and reflect on their own communication skills.

Objectives

At the end of the unit the students will be able to:

1. Describe the process of communication
2. Identify barriers to communication
3. Identify different types of communication
4. Describe different types of leadership
5. Demonstrate and describe the importance of leadership in groups
6. Explain the functions and qualities of an effective leader

7. Describe a group and different types of groups.
8. Describe and explain the Group dynamics.
9. Problem solving in groups.
10. Demonstrate the process of conducting an effective meeting
11. Demonstrate the ability to communicate effectively with their peers.
12. Reflect on their own communication skills

Content

- What is Communication?
- Importance of good communication.
- Verbal and non – verbal communication.
- Barriers to communication.
- Aspects of effective communication.
- Communication in organisations.
- Types of leadership.
- Importance of leadership in groups.
- Functions of leader.
- Qualities of a good leader
- Groups and types of groups.
- Group dynamics.
- Problem solving on groups
- Importance and procedures of meetings
- Conducting meetings

Unit 2

COUNSELLING

18 hours

Description

This unit aims at enabling the students to understand and use the active listening component of counselling. It will reinforce the importance of their communication and listening skills in their role as Therapy Assistant. This unit will help the student to understand when and how to use basic active listening techniques. The main focus will be on enabling the students to acquire practical skills in active listening.

Objective

At the end of the unit the student will be able to:

1. Identify the need for counselling
2. Describe why active listening techniques are important
3. Describe when they would use basic active listening techniques
4. Use basic active listening techniques with a person with disabilities, their family or carers.

Content

- Definition of counselling and active listening.
- Types of counselling and active listening.
- The need for counselling or active listening
- Process and practice active listening

Unit 3

PERSONAL AND PROFESSIONAL DEVELOPMENT 18 hours

Description

In this unit the student learns the skill of reflection in the context of their role as a student and in their future role as a practitioner. They consider their support and learning needs and how they will meet these on completion of the programme.

Objectives

At the end of the unit the student will be able to:

1. Describe their personal learning style.
2. Reflect on their strengths and needs with regard to their professional role.
3. Use reflective practise as a method of self-development.
4. Describe how they will continue their professional development on completion of the training programme.
5. State ethical considerations which they need to consider as Rehabilitation Therapy Assistants.

Content

- Awareness of Self and how others see us
- Awareness of Learning Style
- Awareness of Professional Role
- Strengths and weaknesses
- Reflective and problem solving practise
- Continuous Professional Development
- Ethics and Code of conduct

Unit 4 ORGANISATION AND DOCUMENTATION 18 hours

Description

In this unit students learn the process of documentation, record keeping and the organisational skills required to be a Rehabilitation Therapy Assistant.

Objectives

At the end of the unit the student will be able to:

1. Explain the value and importance of good documentation.
2. Record information relevant to a Rehabilitation Therapy Assistant service.
3. Organise a Rehabilitation Therapy Assistant programme to meets an individual's needs.
4. Carry out day-to day management of a Therapy Unit.

Content

- Designing assessment forms
- Recording assessment and reassessment
- Recording problem lists
- Recording long and short term goal setting
- Recording intervention
- Evaluating treatment and keeping statistics
- Importance of safety for PWD and self
- Time Management and use of a diary
- Fixing and keeping appointments

- 2 Describe participatory methods used in training.
- 3 Teach a specific skill to a person with a disability or their family member.
- 4 Prepare visual aids and training tools for use in an awareness building programme.
- 5 Demonstrate how they would plan a specific training session.
- 6 Demonstrate how they would teach a specific topic to a group of CBR workers.

Contents

- Participatory approach
- Participatory training methods and skills
- Teaching a specific skill to an individual
- How to plan
- Presentation skills
- Preparing visual aids and training tools
- Teaching a group

Unit 7 DISABILITY AND DEVELOPMENT 24 hours

Description

This unit will focus on the socio – economic situation of persons with disability, the attitudes and prejudices that they face and their rights and responsibilities.

Objectives

At the end of the unit the students will be able to:

1. Reflect and analyse on our attitude/values and attitudes towards persons with disabilities, their families and the community (Socio-cultural and religious).
2. Describe how it felt to have a simulated disability.
3. Describe the prevalence of disability in the urban and rural parts of India and the trends in other low income countries. Describe the impact of this on their role as Rehabilitation Therapy Assistants.
4. Describe the need for creating equal opportunities and experiences for PWD to be an integral part of society with a better quality of life.
5. Discuss the social causes of disability in low income countries and the link between poverty and disability.
6. Explain the rights of persons with disabilities and means of accessing the rights.
7. Explain some of the legislation and the resulting provisions for PWDs within the political context in India.
8. Tell the different approaches to rehabilitation.
9. Address disability as a development issue as relevant to their local context.
10. Explain the importance of promoting a barrier free environment for people with disabilities and be able to carry out the same.

Content

- Definition of disability and the disability process
- Attitudes of person with disability, family and community
- Exercise of portrait of disabled person and experiencing disability.
- A day in disabled persons life
- Needs of people in society

- Link between education, poverty and disability
- Status of PWDs in India
- Background to social, political and economic issues in India and other low income countries. The affect on the poor who live in rural and urban areas.
- Disability and women
- Different approaches towards addressing the need of PWDs
- The different models of working with PWD
- Introduction to disability issues, different acts, Government schemes and initiatives, legislation, and methods of accessing them.
- Environmental Barriers and promoting barrier free environment
- Simple methods to create a Barrier Free Environment in house, school, roads, toilets, community levels.

Unit 8 PRIMARY HEALTH CARE 24 hours

Description

In this unit the student learns basic information about the philosophy and structure of Primary Health Care. It will also focus on the working role of Therapy Assistants within this structure.

Objectives

At the end of the unit the student will be able to:

1. Explain the philosophy of Primary Health Care.
2. Identify common health problems encountered in the community.
3. Describe the role of the Rehabilitation Therapy Assistant and know where to refer people with health problems.

Content

- Introduction to primary health care.
- Common childhood illnesses.
- Causes and prevention of disease and infection. Health promotion – to include vaccination programmes, need for good sanitation and clean drinking water.
- Malnutrition.
- Basic First Aid.
- Referral procedures.
- Women’s health.
- Elderly Care
- T.B
- HIV/AIDS.
- Sanitation and hygiene
- The referral process including:
 - Visits to Primary Health Centres
 - Visits to other Referral Centres.

Unit 9 COMMUNITY BASED REHABILITATION (CBR) 24 hours

Description

In this unit the student learns about CBR and its relevance in low income countries. They learn about their role within the CBR framework.

Objectives

At the end of the unit the students will be able to:

1. Describe the different types of rehabilitation services
2. Explain what is CBR and its relevance in low income and developing countries
3. Explain different component of CBR and the guiding principles of CBR implementation.
4. Explain the steps in setting up and the project cycle of a CBR programme
5. Explain their role in a CBR programme.
6. Assist in planning, implementing, monitoring and evaluating of the CBR programme.

Content

- What is CBR?
- How is CBR different to other approaches to rehabilitation? (Institutional based Rehabilitation, Community Based Rehabilitation, Camps, Outreach services, mobile services)
- Strength and limitations of CBR.
- Principles involved in the implementation of a CBR programme – Roles of different stake holders, optimum use of resources and bridging the gap between the PWDs in the community and the resources.
- Components of CBR – Health (Prevention, promotion, cure, Rehabilitation), Education (Pre-primary, Primary, Secondary, higher and special education), economic (Job oriented training, IGP, advocacy) and Social (Environmental, societal, religious barriers, sports and recreational barriers).
- Roles and responsibilities of the implementing agency.
- Roles of the student in contributing to an effective CBR programme.
- Individual Rehabilitation Plan and Review.
- Role of students in planning, implementing, monitoring and evaluating of the CBR programme.
- Need for basic Documentation in a CBR programme.

4.2 Specialised Modules

Paper 3 CLINICAL STUDIES (DISABLING CONDITIONS) 198	7 Credits
hours	

Overall Description

In this module the students learn about the specific disabling conditions introduced in this programme. This includes their cause, resulting functional problems, the rehabilitation plan including different therapeutic and prosthetic /orthotic intervention, and appropriate referrals to other agencies. Several of the units are divided into 2 or 3

parts. In the first part, the students learn the basic knowledge and skills. Part 2 and 3 focuses on knowledge and skills required by Rehabilitation Therapy assistant.

Overall Objective

For the students to be introduced to the common conditions of PWDs that they will be providing intervention for in their community.

Units	Hours
1. Polio	12
2. Cerebral Palsy	15
3. Muscular Dystrophy	9
4. Amputation	12
5. Congenital deformities	15
6. Spina Bifida	9
7. Stroke	9
8. Spinal Cord Injuries	9
9. Arthritis	6
10. Fractures	9
11. Mental Retardation	18
12. Mental Illness	18
13. Visual impairment	18
14. Speech and/or Hearing impairment	18
15. Hansen Disease	3
16. Burns	3
17. Peripheral Nerve Injuries	6
18. Other disabling conditions	9
Total Number of Hours	198

Unit 1

POLIO

12 hours

Description

This unit is divided into 2 parts. In Part 1 students learn about the causes and presenting signs and symptoms of Polio. They learn about the general rehabilitation management of a person with polio.

In Part 2 students focus on more detailed assessment and intervention.

Objectives

At the end of the unit the student will be able to:

Part 1 – 6 hours

1. Describe the effects of Polio
2. Describe the four different stages of Polio
3. Carry out a basic assessment of a person with Post Polio Residual Paralysis (PPRP)
4. Describe basic management of person with Post Polio Residual Paralysis (PPRP)
5. Refer a person with PPRP to the appropriate resource

Part 2 – 6 hours

1. Describe more detailed assessment and rehabilitation intervention for a person with Polio and PPRP

Unit 2 CEREBRAL PALSY 15 hours

Description

This unit is divided into 2 parts. In Part 1 students learn about the causes and presenting signs and symptoms of Cerebral Palsy. They learn about the general rehabilitation management of children with Cerebral Palsy.

In Part 2 students focuses on more detailed therapy assessment and intervention.

Objectives

At the end of the unit the students will be able to:

Part 1 – 9 hours

1. Identify and describe Cerebral Palsy
2. Describe the problems experienced by children who are born with this condition.
3. Carry out a basic assessment and describe management of children with Cerebral Palsy.
4. Describe the importance of activity for a child with a Cerebral Palsy.
5. Give advice to parents with regard to functional activity, communication and behavioral problems with their child.
6. Refer a child with Cerebral Palsy to the appropriate resource

Part 2 – 6 hours

1. Describe more detailed assessment and therapy intervention with a child with Cerebral Palsy
2. Give advice and training to parents on functional activity with their child.

Unit 3 MUSCULAR DYSTROPHY 9 hours

Description

This unit is divided into 2 parts. In Part 1 students will learn the signs and symptoms and prognosis of a person with Muscular Dystrophy, the type of people who are affected and how simple orthotic intervention and therapy can help. The students will also look at how they can support families of children with M.D.

In Part 2 students will focus in more detail on therapy assessment and intervention.

Objectives

At the end of the unit the students will be able to:

Part 1 - 3 hours

1. Describe and identify people (children) with Muscular Dystrophy.
2. Identify the main problems of a child with Muscular Dystrophy.
3. Carry out a basic assessment and describe the management of a child with Muscular Dystrophy
4. Explain how they can support the family and carers of people with Muscular Dystrophy.
5. Refer a person with Muscular Dystrophy to the appropriate resource

Part 2 – 6 hours

1. Carry out a detailed assessment a child with muscular dystrophy.

2. Describe how therapy intervention can help.

Unit 4 AMPUTATION

12 hours

Description

This unit is divided into 2 parts. In Part 1 the students will learn what is an amputation, what can cause it and what complications can occur.

In Part 2 students will focus on how an amputee can be helped by therapy and prosthetic intervention.

Objectives

At the end of the unit the student will be able to:

Part 1 – 3 hours

1. Describe the causes and complications of amputations.
2. Identify different levels of amputations in the upper and lower limb.
3. Carry out basic assessment and describe the management of amputations
4. Refer a person with an amputation to the appropriate resource

Part 2 - 9 hours

1. Describe good positioning to decrease joint stiffness in above and below knee amputees.
2. Describe and explain appropriate therapy and prosthetic treatment for different stages of recovery for an amputee.
3. Describe appropriate therapy and prosthetic treatment for different stages of recovery for an amputee.
4. Demonstrate appropriate bandaging techniques for amputees.
5. Demonstrate appropriate massage technique.
6. Demonstrate the process of gait training for amputees
7. Identify gait problems and describe solutions to decrease these.

Unit 5 CONGENITAL DEFORMITIES

15 hours

Description

This unit focuses on the following congenital deformities: Cleft lip and cleft palate, missing limbs, back knee (Genu recurvatum), knock knee, (Genu valgum) bow leg (Genu varum), and club feet (CTEV)

In Part 1 the students will look at identification of all the signs and symptoms of each condition, basic management and appropriate referrals for each.

In Part 2a students will focus on Therapy & Orthotic assessment and intervention for children with Genu recurvatum, knock knee, bow leg, club feet and Therapy & Prosthetic assessment and intervention for children with missing limbs.

Objectives

At the end of the unit the student will be able to:

Part 1 – 6 hours

1. Describe the symptoms and features of each condition.
2. Describe the problems/disabilities associated with each condition.
3. Carry out a basic assessment and describe the basic management of each disability.
4. Refer a person with congenital deformities to the appropriate resource

Part 2 – 9 hours

1. Describe appropriate orthotic management for Genu recurvatum, knock knee, club feet.
2. Describe appropriate therapy assessment and management for Genu recurvatum, knock knee, club feet.
3. Describe appropriate prosthetic management for children with missing limbs
4. Describe appropriate therapy assessment and management for children with missing limbs.

Unit 6 SPINA BIFIDA**9 hours****Description**

This unit is divided into 2 parts. In Part 1 of it students will learn about the problems encountered by children who are born with Spina Bifida and Hydrocephalus and what they can do to help them.

In Part 2 students look in more detail at therapy assessment and intervention

Objectives

At the end of the unit the students will be able to:

Part 1 - 3 hours

1. Describe what is Spina Bifida and Hydrocephalus
2. Explain the problems encountered by children who are born with this condition.
3. Carry out a Basic assessment and describe the basic management of the problems encountered by a child with Spina bifida
4. Refer a person with Spina Bifida to the appropriate resource
5. Describe what advice they may give to parents of a child with Spina bifida

Part 2 – 6 hours

1. Describe how they would assess a child with Spina bifida
2. Describe and demonstrate therapy intervention for a child with Spina Bifida

Unit 7 STROKE**9 hours****Description**

This unit is divided into 2 parts. In Part 1 of this unit students learn about hemiplegia – what it is how it is caused and what basic therapy interventions and orthosis can be used to help a person who has a hemiplegia.

Part 2 looks in more detail at therapy assessment and intervention of the functional problems resulting from a stroke.

Objectives

At the end of the unit the students will be able to:

Part 1 -3 hours

1. Describe hemiplegia and its causes
2. Identify and Describe the 3 stages of hemiplegia
3. Describe a basic assessment of a person with a hemiplegia and identify problems that a therapy assistant can help with.
4. Refer a person with a stroke to the appropriate resource

Part 2 - 6 hours

1. Carry out a detailed assessment of a person who has had a stroke including basic functional assessment.
2. Describe visual, perceptual and cognitive functions and how they are affected in case of stroke
3. Describe appropriate therapy and orthotic intervention for a person who has had a stroke.

Unit 8 SPINAL CORD INJURY

9 hours

Description

This unit is divided into 2 parts. In Part 1 of this unit student learn what a spinal cord injury is, how such an injury affects a person, basic management principles and appropriate referrals.

Part 2 looks in more detail at therapy assessment and intervention and the role they have with in the rehabilitation of people with a spinal cord injury.

Objectives

At the end of the unit the students will be able to:

Part 1 - 3 hours

1. Explain what a spinal cord injury is and the different causes of this condition.
2. Describe the problems experienced by a person with a spinal cord injury.
3. Carry out a basic assessment and describe the basic management of the problems encountered by a person with a SCI
4. Refer a person with SCI to the appropriate resource

Part 2 – 6 hours

1. Carry out a detailed therapy assessment of a person with a spinal cord injury.
2. Describe and demonstrate (where possible) therapy intervention.

Unit 9 ARTHRITIS

6 hours

Description

In this unit the student learns about the difference between the various types of arthritis and how they can help relieve pain and joint stiffness

Objectives

At the end of the unit the students will be able to:

1. Differentiate between the various types of arthritis
2. Describe an arthritic joint
3. Explain how Therapy and Orthotic intervention can help a person with arthritis.

Unit 10 FRACTURES

9 hours

Description

This unit is divided into 2 parts. In part 1 students learn what a fracture is, how a fracture heals and basic management of fractures

In Part 2 students learn about the role of the Therapy and Orthosis in the treatment of fractures.

Objectives

At the end of the unit the students will be able to:

Part 1 – 3 hours

1. Describe fracture, its cause and compare different types of fractures.
2. Describe how a fracture heals.
3. Carry out a basic assessment and describe the management of different types of fractures
4. Refer a person with fracture to the appropriate resource

Part 2 -6 hours

1. Describe appropriate therapeutic and orthotic assessment and intervention and treatment following a fracture.

Unit 11 MENTAL RETARDATION

18 hours

Description

This unit is divided into 2 parts. In part 1 student learns to identify a person with mental retardation and where to refer a person with this condition.

In part 2 of this Unit Rehabilitation Therapy Assistants learn how to design and implement a basic therapy programme for people with mental retardation and their families.

Objectives

At the end of this unit the student will be able to:

Part 1 – 6 hours

1. Describe the behaviors found with people with mental retardation.
2. Differentiate between Mental Retardation and Cerebral Palsy.
3. Refer a person with Mental Retardation and their family to the appropriate resources.

Part 2 – 12 hours

1. Describe therapy assessment and intervention with a person with mental retardation.

Unit 12 MENTAL ILLNESS

18 hours

Description

In this unit the student learns how they can help a person with a mental illness. The student will be able to design and implement a basic therapy programme for people with mental illness.

Objectives

At the end of this unit the student will be able to:

1. Describe different types of mental illness.
2. Describe what can be done to help people with different types of mental illness.
3. Describe what they would do to help a person with a mental illness if this person was referred for therapy or an orthopaedic appliance.

4. Refer a person with mental illness and their family to relevant mental health service

Unit 13 VISUAL IMPAIRMENT 18 hours

Description

This unit is divided into 2 parts. In part 1 student learns about the common causes of visual impairment and how it can be prevented. They learn how to help a person with visual impairment use a mobility aid.

In part 2 of this Unit students learn how help a person with visual impairment to become as independent as possible in the life skills that are important to them.

Objectives

At the end of the unit the student will be able to:

Part 1 - 6 hours

1. Describe the common causes of visual impairment.
2. Describe basic how visual impairment can be prevented
3. Help a person with a visual impairment to use a mobility aid.
4. carry out a basic assessment to identify and differentiate between low vision and blindness and refer a person with visual impairment to the appropriate resources

Part 2 - 12 hours

1. Carry out basic functional assessment and intervention to promote independence in the life skills that are important to the person with a visual impairment.
2. Carry out basic mobility training for a person with a visual impairment

Unit 14 SPEECH AND/OR HEARING IMPAIRMENT 18 hours

Description

This unit is divided into 2 parts. In Part 1 student learn about speech and hearing impairment and how they can communicate with a person with a speech and/or hearing impairment or disability.

In Part 2 Rehabilitation Therapy Assistant Students learn about basic assessment and intervention for a person with this problem.

Objectives

At the end of the unit the student will be able to:

Part 1 - 6 hours

1. Identify speech and/or hearing problems.
2. Describe basic principles of communicating with a person with speech and/or hearing problems
3. Refer a person with speech and/or hearing impairment to the appropriate resources

Part 2 - 12 hours

1. Carry out a basic assessment and intervention for common speech and hearing problems.
2. Encourage total communication skills that are age appropriate for a child with speech and/or hearing problems.

In this unit the student learns about some of the less common bone problems that they may meet in the field and how they can help people with these conditions.

Objectives

At the end of the unit the student will be able to:

1. Describe the signs and symptoms of:
 - a. osteomyelitis
 - b. osteoporosis
 - c. T.B. spine
 - d. Tumours of the bone
 - e. Rickets
 - f. Dibetis mellitus
 - g. Disease of Shoulder, elbow and wrist
 - h. Perthes disease
 - i. Coxavara and Coxavalga
2. Explain why it is important to get medical advice with these conditions
3. Describe how therapy and Orthotic intervention can help a person with these conditions.
4. Refer a person with one of the above conditions to the appropriate resource

Paper 4	APPLIED REHABILITATION	306 hours 10 Credits
----------------	-------------------------------	---------------------------------------

D) –REHABILITATION THERAPY **276 hours**

Overall Description

In this module the student's learning will be directed at the application of basic procedures/techniques/strategies used in therapy. This module seeks to develop relevant skills and positive attitudes in the application of the different procedures / techniques / strategies.

Overall objective

To be able to apply the stated procedures, techniques and strategies for the treatment of persons with disability in a safe and competent manner.

Units	Hours
-------	-------

1. Introduction to Rehabilitation	24
2. Needs and Priorities of PWDs	6
3. Range of Motion	15
4. Stretching	15
5. Strengthening	15
6. Pain Relief	6
7. Massage	6
8. Standing Up	6
9. Therapy intervention to facilitate normal muscle tone and normal movement	12
10. Respiratory treatments	12
11. Bandaging	12
12. Hand function	6
13. Transfers	12
14. Developmental Aids	24
15. Walking Aids	9
16. Wheelchairs	9
17. Gait analysis and training	24
18. Activities of daily living	24
19. Therapeutic Activities and Activity Analysis	12
20. Aids for daily living	9
21. Home adaptations	9
22. Recreational activity and play	9
Total Number of Hours –	276

Unit 1 INTRODUCTION TO REHABILITATION

24 hours

Description

In this unit the student learns about the role of the Rehabilitation Therapy Assistant and Prosthetist & Orthotist/ Orthopaedic Technologist/ Technician within the rehabilitation team and how they can help the rehabilitation process.

Objectives

At the end of the unit the students will be able to:

1. Describe the rehabilitation process
2. Describe the difference between impairment, disability and handicap
3. Describe the role of the Rehabilitation Therapy Assistant and explain how the therapy assistant can help people with disabilities as part of the rehabilitation process.
4. Describe the role of the Prosthetist & Orthotist/ Orthopaedic Technologist/ Technician and explain how orthoses / prostheses can help people with disabilities as part of the rehabilitation process.
5. Describe the roles of members of the rehabilitation team.
6. Describe the difference between remedial and adaptive approaches in therapy
7. Define some of the simple therapy techniques that will be used on the course
8. Describe and explain benefit of using an orthopaedic appliance and it's effect on the other treatment programmes of rehabilitation.

Objectives

At the end of the unit the student will be able to:

1. Describe and demonstrate the sitting position of a person preparing to stand
2. Identify important body movements that help a person to stand
3. Demonstrate how a therapist can help a person to stand
4. Demonstrate techniques to help a person get up from the floor

Unit 9 THERAPY INTERVENTIONS TO FACILITATE NORMAL MUSCLE TONE AND NORMAL MOVEMENT **12 hours**

Description

In this unit the student learns basic methods to normalise muscle tone and facilitate normal movement in a person with a neurological disability. (This will include interventions for spasticity, flaccidity, ataxia and athetoid movements and problems with balance coordination and fine motor control.)

Objectives

At the end of the unit the students will be able to:

1. Help to relax spastic muscles and encourage normal movement through therapy techniques and functional activities.
2. Help to increase tone in flaccid muscles through therapy techniques and functional activities.
3. Help to improve muscle control in people with ataxia and athetosis through therapy techniques and functional activity
4. Help to improve balance and coordination in people who have neurological problems

Unit 10 RESPIRATORY TREATMENTS **12 hours**

Description

In this unit the student learns how to help a person with breathing problems.

Objective

At the end of the unit the student will be able to:

1. Describe respiration
2. Describe the indications for and demonstrate different breathing activities that will help a person with a disability
3. Describe and demonstrate different ways to remove secretions from the lungs

Unit 11 BANDAGING **12 hours**

Description

In this unit the student explains the function of bandaging and how to apply bandages effectively for amputees, muscle strain and sprain.

Objectives

At the end of the unit the students will be able to:

1. Explain the functions of and indications for bandaging
2. Describe the general rules of bandaging
3. Demonstrate appropriate bandaging techniques

Unit 12

HAND FUNCTION

6 hours

Description

In this unit the student learns about different functions of hand and basic assessment and intervention for people with hand function limitations.

Objectives

At the end of the unit the student will be able to:

1. Describe what hand function is.
2. List the different types of pinch and grasp.
3. Tell the difference between grasp and grip.
4. Demonstrate the resting position of the hand and the functional position of the hand.
5. Assess hand function limitations and demonstrate appropriate intervention.

Unit 13

TRANSFERS

12 hours

Description

This unit the student learns about different types of transfer and how to safely assist a PWD to transfer from one place to another.

Objectives

At the end of the unit the student will be able to:

1. Tell the 4 main things that they have to check before deciding to assist a person to transfer.
2. Explain the general rules for all transfers.
3. Describe and demonstrate methods of assisting a PWD with appropriate transfers using safe back care techniques.

Unit 14

DEVELOPMENTAL AIDS

24 hours

Description

This unit explains the different processes involved in the fabrication of Development aids and simple modifications to meet the need of the specific condition of the User/PWD

Objectives

At the end of the unit the students will be able to:

1. Fabricate simple designs of Development aids.

2. Explain the different process involved/ materials and tools required during the fabrication of Development aids.
3. Explain the need for different Development aids and also the need of timely follow-up.

Unit 15**WALKING AIDS****9 hours****Description**

In this unit the student learns about the different types of walking aids available to them. Students learn how to assess and prescribe and teach PWD how to use them.

Objectives

At the end of the unit the student will be able to:

1. Select the appropriate aid needed to help a PWD walk.
2. Correctly measure and fit the walking aid.
3. Demonstrate the appropriate gait to use with the aid.
4. Demonstrate negotiating stairs with a walking aid.

Unit 16**WHEELCHAIRS****9 hours****Description**

In this unit the student learns the indication for wheelchair use. They learn how to measure and adapt wheelchairs according to the need of PWDS.

Objectives

At the end of the unit the student will be able to:

1. Identify when to prescribe a wheelchair to person with disability.
2. Carry out the relevant measurement for a wheelchair fitting.
3. Select appropriate wheelchair adaptations for the different needs of PWDS

Unit 17**GAIT ANALYSIS AND TRAINING****24 hours****Description**

In this unit the student learns the principles behind normal gait and how people who have difficulty in walking can be helped to gain a better walking pattern

Objectives

At the end of the unit the students will be able to:

1. Describe normal gait.
2. Identify the main muscles used in walking.
3. Demonstrate activities that prepare a person for walking.
4. Identify and help the person with disability to correct abnormal gait patterns.

Unit 18**ACTIVITIES OF DAILY LIVING****24 hours****Description**

In this unit the student learns how to identify a person's problems in their activities of daily living. They learn to use problem solving approach to increase independence in activities of daily living. Special attention is given to therapeutic intervention for problems with personal care.

Objectives

At the end of the unit the student will be able to:

1. Identify the different components of activities of daily living.
2. Use a problem solving approach to help PWD to become more independent in activities of daily living.
3. Provide appropriate treatment activities for these components:
 - Feeding and drinking
 - Dressing and undressing
 - Bathing and toileting
 - Self care

Unit 19 THERAPEUTIC ACTIVITY AND ACTIVITY ANALYSIS 12 hours

Description

In unit the students learn how graded activity can be used as part of therapy intervention. This unit shows the student how to select an appropriate activity for treatment of physical dysfunction and health maintenance.

Objectives:

At the end of the unit the student will be able to:

1. Describe the importance of activity in daily living.
2. Gain participation from the person.
3. Select activities that are age appropriate, therapeutic, goal directed and purposeful.
4. Grade a specific therapeutic activity.

Unit 20 AIDS FOR DAILY LIVING 9 hours

Description

In this unit the student learns the indications for the use of aids for daily living. The student's uses a problem solving approach to design and produce special devices or equipment to make a particular activity possible for the person to be independent. Emphasis is placed on the use of locally available materials.

Objectives

At the end of the unit the students will be able to:

1. Problem solve with regards to knowing which aids to daily living are appropriate for a particular person.
2. Make devices and equipment that are suitable for activities of daily living using local resources.

Unit 21 HOME ADAPTATIONS 9 hours

Description

In this unit the students learn how to enable a person with disability to be independent in their home environment through the use of adaptations

Objectives

At the end of the unit the students will be able to:

1. Assess barriers in the home and environment.
2. Make a barrier free home environment through adaptations.

Unit 22 RECREATIONAL ACTIVITY AND PLAY 9 Hours

Description

In this unit the student learns the importance of leisure pursuits for an adult and how these can be used for therapeutic purposes. Students learn the importance of play both as a tool for learning and developing and as a therapeutic intervention for children with disabilities.

Objectives

At the end of the unit the students will be able to:

1. Explain how recreational activity is used as part of therapy intervention with adults.
2. Explain and demonstrate the use of play as a therapeutic intervention with children.

II) –COMPLEMENTARY OR ASSOCIATED REHAB (ORTHOTICS and PROSTHETICS) 30 hours

Description

This unit is divided into 2 parts. In part 1 of this unit Rehabilitation Therapy Assistant learns a basic knowledge of Orthotic to enable them to assist Orthotist/ Orthopaedic Technologist/ Technician to work as a part of the Rehabilitation team.

In part 2 of this unit Rehabilitation Therapy Assistant learns a basic knowledge of Prosthetic to enable them to assist Prosthetist/ Orthopaedic Technologist/ Technician to work as a part of the Rehabilitation team.

Part 1 – Objectives

At the end of the course the students will be able to:

1. Describe the common types of orthotic, mobility and rehabilitation aids.
2. Assist the orthotist in their activities.
3. Do minor repairs to orthotic appliances.
4. Help a PWD to use their appliance functionally.
5. Fabricate various types of splints and mobility aids.
6. Advise local craftsmen on the fabrication of developmental aids.

Content

- Introduction to Orthotics.
- Different types of Orthotics.
- Knowledge of different tools and materials.
- Fabrication of PVC splints.
- Fabrication of gaiters.
- Fabrication of developmental aids.
- Simple repairs of orthosis.
- Fabrication of low cost walking aids.
- Simple repairs of Mobility and Rehabilitation aids.

**Part 2 -
Objectives**

At the end of the course the students will be able to:

1. Describe the common types of prosthetic aids.
2. Assist the Prosthetist in their activities.
3. Do minor repairs prosthetic appliances.
4. Help a PWD to use their appliance functionally.

Content

- Introduction to prosthetics.
- Different types of prosthetics.
- Simple repairs of prosthesis.

4.3 INTEGRATION/CLINICAL PRACTISE MODULE**Description**

The integration/Clinical practice module provides the students with the opportunity to link the skills and knowledge learnt throughout the course and focus on their individual needs as learners.

Integration/Clinical practice is divided into 2 parts. The first is Training Institute based and here students work with PWDs either in the therapy unit and workshop within the campus or in the CBR project area.

The second part is divided into 2 placements at rural organisations. These provide students with experience in a rural environment with the use of locally available material

Objectives

The integrative study provides the students with the opportunity to link the skills and knowledge learnt throughout the course and focus on their individual needs as learners.

Paper 5 Clinical Experience and Integrative Studies

**360 hours
10 Credits**

Overall Description

This represents the ongoing clinical experience students have in the therapy unit, workshop and in the urban slums throughout the whole of their years study. Students already have considerable practical experience in the workshop and in the field during the specific modules already covered. During this module they gradually develop their ability to integrate knowledge and skills from all other modules.

They are required to carry out supervised assessment and therapy intervention for the PWD who are referred to training institute. Emphasis is placed on the Students gaining experience of working with individual clients from the stages of assessment through to discharge. They document their client related activities, liaise with other members of the rehabilitation team as appropriate and work collaboratively with each client they treat to meet their goals. Skilled and experienced staff are on hand to offer supervision and on the job training throughout this module with the aim that as the students proficiency are increased, levels of support are withdrawn to develop student's own confidence and decision making capacity.

An integrative study runs every Saturday throughout the whole of the year. It represents the time spent by students carrying out individual work, group project work and independent study and practise. It is designed so that students are able to reflect on the learning through the taught aspects of the modules already stated. A learner-centred approach is used so that students are able to use some of this time to work on their individual areas of need which may be specific to the context they will return to or may be specific to parts of the course they find difficult or are particularly interested in.

This contributes to the development of the problem solving skills required to provide Therapy service to individual people with disabilities.

Overall Objectives

At the end of this module student will be able to:

1. Assess a person with a disability, identify the areas for intervention, set goals, plan and practice therapeutic skills. (Under supervision).
2. Communicate appropriately with the PWD, their family and any other professionals involved.
3. Work collaboratively with other members of the multidisciplinary team on specific tasks. i.e. awareness programmes, assessment and fitment programmes, follow ups.
4. Make any necessary referrals.
5. Document their intervention and plan.
6. Manage and organise a small client case load.
7. Work within their capacity.
8. Behave professionally.
9. Designing a workshop layout
10. Collaborative case studies
11. Students Designing information leaflets, handouts, models, awareness posters
12. Project to describe students' organisations infrastructure
13. Designing a mobility training programme for a person with a visual impairment

14. Students experiencing and reflecting on the functional implications of wearing an orthosis through simulation activities.

Paper 6	Rural Placement	180 hours 5 Credits
----------------	------------------------	--------------------------------

Overall Description

The experience of working with a rural organisation provides opportunity for students to experience rehabilitation outside the training institute. The rural organisations are predominantly based in rural areas which mean that students have opportunity to experience working in a different environment. They are able to apply basic concepts and principles to practical situations in the community and develop proficiency in rehabilitation intervention.

Students are exposed to basic principles of management within this context as some assistants may be required to organise the day-to-day management of small rural rehabilitation units.

Overall Objectives

By the end of this module the student will be able to:

1. Observe and take part in the awareness programme conducted by the organization in the community. (if possible) This could include:
 - a. Maintenance and repair of Aids & Appliances.
 - b. Early identification and Intervention of Disabilities.
2. Be actively involved in the documentation procedure followed by Organization.
3. Behave in a professional manner throughout the visit.
4. Communicate effectively with PWDs, family, and members of rural organization.
5. Take part in the rehabilitation intervention done and followed by the organization in the community level.

Specific Objectives

At the end of rural placement Rehabilitation therapy students will be able to:

Placement I

1. Assess a person with a disability.
2. List problem areas.
3. Set goals with the client.
4. Plan intervention.
5. Practise therapeutic skills.
6. Follow-up therapeutic skills.
7. Prepare 1 case study.

Placement II

1. Assess a person with a disability.
2. List problem areas.
3. Goal setting with the client.
4. Plan intervention.
5. Practise therapeutic skills.

6. Follow-up therapeutic skills.
7. Follow-up of therapeutic skills.
8. Carry out minor repair of Aids & Appliances.
9. Prepare 2 case studies.

4.4 Supporting Modules

ENGLISH AND MATHS

48 hours

Overall Description

The contents of this section are based on the needs of the students. The ultimate aim is for the students to understand the literature/text materials and lectures required for their course, to record the necessary information for documentation in English and to manage functional day to day communication. This module also focuses on the simple mathematics and applied geometry, which will enable students to perform simple mathematical calculations, measure simple angles and maintain a written record in the form a graphical data.

Overall Objectives

At the end of the section the students will be able to:

1. Explain/describe in their own words the need for them to understand the English language and applied mathematics.
2. Collect/document any information / graphical data to analyse and understand any situation / condition of persons with disabilities in the community in the English language.
3. Describe/explain their own role in the rehabilitation field in English.
4. Speak in a group and be able to explain their ideas in English.
5. Elementary mathematics

COMPUTER APPLICATIONS

24 hours

Overall Description

In this section the students gain a basic knowledge of computing. This will enable them to make use of computers for simple filing system of the day to day activities of the organisation and also to maintain and store records (data storing).

Overall Objectives

At the end of the section the students will be able to:

1. Explain why a basic knowledge of computing will be useful to them.
2. Describe what basic computer terms mean.
3. Use Windows, Word and Excel Use the Internet.
4. Describe what a computer virus is.

DRAWING AND SKETCHING

12 hours

Overall Description

In this section the student learns the different methods of representation of ideas through simple sketches and drawings. They learn to use drawing and sketches to explain technical concepts/ideas. They will make simple assembly drawings of Therapeutic as well as Orthotic and Prosthetic devices / appliances. The aim of the module is to develop the student's analytical and graphical representation skills by the means of isometric sketching and simple drawings.

Overall Objectives

At the end of the section the students will be able to:

1. Demonstrate the different movements of body parts, weight bearing and non-weight bearing positions of the human body in context with the effect of gravity and the extent of deformity through sketches and models.
2. Draw simple sketches and explain the different orthopaedic conditions along with the sketches of appropriate appliances.
3. Demonstrate a particular orthopaedic appliance through the use of drawings and sketches.
4. Make simple assembly drawings of the therapeutic as well as Orthotic and the prosthetic appliances.

SECTION 5 - TEACHING MATERIALS

Core Modules

Recommended Reading

- Rehabilitation Therapy Assistant Manual – Mobility India
- Training Manual For Mid-Level Therapists- Introduction To Physical Therapy (Handicap International)
- Disabled Village Children-A Guide For Community Health Workers, Rehabilitation Workers And Families- VSO (David Werner)
- Where There Is No Doctor - A Health Guide Book-Vhai
- Building Abilities-A Handbook To Work With People With Disability – ADD India
- Training In The Community For People With Disabilities-Guide For Local Supervisor and For People With Disabilities
- Towards Inclusive Communities
- Sanchar-An Experience Of Community-Based Rehabilitation Of Disability – Sanchar
- Project Prachar-Programme For Rural Awareness In Community Health And Rehabilitation - Dr. Thomas Abraham
- Community Action On Disability-Guyana Community Based Rehabilitation Programme - Brian O' Toole
- Basic CBR Training Manual For CBR Workers - David Thomforde

- Manual For CBR Workers About Orthosis /Crutches/ Speech & Hearing/ Disability)
- Management Of Cerebral Palsy In Developing Countries - Barbara Decleire
- Helping A Person Who Has Had A Stroke-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Simple Equipment To Help People With Disabilities-Training Materials For CBR Workers - Prof .Dr. Soeharso

Reference books

- Training For Transformation-A Handbook For Community Workers-Vol-I to Vol III - Anne Hope And Sally Timmel
- Community Based Rehabilitation In Vietnam
- Training Programme For Parents-A Manual To Help Develop Daily Activities Of Their Children - T.Raftis & N.Raftis
- The Mind Matters-Disability Attitudes And Community Based Rehabilitation - Ajit K.Dalal, Namita Pande, Nisha Dhawan
- Prevention Of Disability-A Pictorial Chart/Manual For Community Based Rehabilitation Workers - Regional Rehabilitation Training Centre
- Community Based Rehabilitation As We Have Experienced It Voices Of PWD Part-I & Part 2 - WHO, Shia
- Management Of The Child With A Serious Infection Or Severe Malnutrition
- What Is Aids? Manual For Health Workers
- Poverty And Health – WHO
- Practical Guidebook 1-Prevention Of Disabilities - Geeta Chopra
- Practical Guidebook 2-Early Detection Of Disabilities And Disabled Persons In The Community - Geeta Chopra
- Gray's Anatomy – Peter L. Williams & Rogar Warwick
- Essentials Of Anatomy - Inderbir Singh
- The Anatomy Coloring Book - Wynn Kapit/Lawrence M. Elson
- Anatomy And Physiology For Nurses - Evenln C. Pearce
- Anatomy And Physiology For Nurses - R.S.Winwood And J.L.Smith
- Foundations And Techniques In Neurological Rehabilitation – Ab Taly, Bm Maheswarappa, Kp Sivaraman Nair, Uk Syam, T.Murali
- Brain And Bannister's Clinical Neurology-Vii Edition – Sir Roger Bannister
- From Birth To Five Years-Children's Development Progress – Marion Frost And Dr. Ajay Sharma
- A Manual For Participatory Training Methodology In Development- Society For Participatory Research In Asia
- Inclusive Education- Ture Jonsson- United Nations Development Programme
- The Education Of Mid-Level Rehabilitation Workers- Rehabilitation World Health Organisation
- Guidelines For Translation And Adaptation Of The Manual-"Training In The Community For People With Disabilities"- WHO
- Promoting Independence Of People With Disabilities Due To Mental Disorders (A Guide For Rehabilitation In Primary Health Care-WHO
- Primary Health Care- WHO, UNICEF

Specialised Modules

Recommended Reading

- Therapy Assistant Manual-Vol-I to Vol IV
- Handling The Young Child With CP At Home 3rd Edition - Nancie R Fannie
- Toileting For Cerebral Palsy, Your Baby, Physical Manage, Vocational Training, Behaviour Management, Cleaning
- Let's Communicate (A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Communication Sec-1(A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Assessment Sec-2 (A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Goal Planning Sec-3 (A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Mental Handicap Sec-4 (A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Cerebral Palsy Sec-5 (A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Hearing Impairment Sec-6 (A Handbook For People Working With Children With Communication Difficulties) -Dr.Enrico Pupulin
- Multiple Disability Sec-7 (A Handbook For People Working With Children With Communication Difficulties) - Dr.Enrico Pupulin
- Training Package For A Family Member Of A Child Who Has Difficulty Seeing
- Training Package For A Family Member Of A Child Who Has Difficulty Hearing Or Speaking
- Training Package For A Family Member Of A Child Who Has Difficulty Moving
- Training Package For A Family Member Of A Child Who Has No Feeling In The Hands Or Feet
- Training Package For A Family Member Of An Adult Who Shows Strange Behaviour
- Training Package For A Family Member Of A Child Who Has Fits
- Training Package For A Family Member Of A Child Who Has Difficulty Learning
- Training Package For A Mother Of A Baby With A Disability- (Breast Feeding, Play Activities, Schooling, Social Activities, Job Placement Job Placement)
- Promoting The Development Of Infants And young Children With Spina Bifida And Hydrocephalus-A Guide For Mid-Level Rehabilitation Workers
- Promoting The Development Of Young Children With Cerebral Palsy -A Guide For Mid-Level Rehabilitation Workers
- Promoting Independence Following A Spinal Cord Injury- A Manual Of Mid-Level Rehabilitation Workers
- Children With Cerebral Palsy- A Manual For Therapists, Parents And Community Workers - Archie Hinchecliffe
- Handbook Accessibility And Tool Adaptations For Disabled Workers In Post Conflict And Developing Countries - David Dilli
- A Manual Of Aids For The Multiply Handicapped -Upkaran
- Promotion Of Non-Handicapping Physical Environments For Disabled Persons: Case-Studies - United Nations
- Living Without Barriers-Technical Details - United Nations

- Access For All-Helping To Make Participatory Process Accessible For Everyone - Save The Children
- Play Helps 4th Edition – Romalear

Reference books

- Helping Children Who Have Difficulty Eating And Drinking-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping Children Who Have Difficulty Talking And Communicating-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping Children With Mental Handicap And Those With Behaviour Problems-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping Children With Severe Mental Illness-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping A Person With Problems Breathing-Training Materials For CBR Workers - Prof.Dr.Soeharso
- Helping People Who Have Epilepsy-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Special Activities To Help Children Grow-Training Materials For CBR Workers – Prof .Dr. Soeharso
- Early Detection Of Disability For Children Under Five-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Detection Of Childhood Disability Trainers' Manual-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping A Person With Pain, Weakness Or Stiffness-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping A Person To Move-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Helping Prevent Disability-Training Materials For CBR Workers - Prof .Dr. Soeharso
- Finding Out About A Person And Her Problems-Training Materials For CBR Workers Prof .Dr. Soeharso
- Essential Orthopaedics And Trauma-Third Edition - David J.Dandy
- Text Book Of Medical Physiology - Arthur C. Guyton And John E.Hall
- Aply's System Of Orthopaedics And Fracture-Eight Edition - Louis Solomon
- Willard And Spackman's Occupational Therapy 9th Edition – Maureen E.Nustad
- Occupational Therapy Practice Skills For Physical Dysfunction 4th Edition - Lorraine Williams Pedreth
- Community Mental Health
- The Principles Of Exercise Therapy-Iv Edition - M.Dena Gardener - Carolyn Kishes Lynn Allen Colby
- Steps To Follow IInd Edition - Laura K.Smita Elizabethlwess
- Physiotherapy In Paediatrics- Robert Shepherd
- Cash Textbook Of Orthopaedics And Rheumatology For Physiotherapists 2nd Edition - Marian E Tidswell
- Guidelines For The Prevention Of Deformities In Polio
- Cash's Textbook Of Neurology For Physiotherapists-4th Edition - Patricia A Downie
- Muscles Testing And Function - Florence Peterson Kendall And Elizabeth Kendal Mccreary

- Neurological Intervention For Physical Therapist Assistants - Suzzanne "Tink" Martin, Mary Kessler
- Therapy For Amputees - Barbara Engstrom, Catherine Van De Ven
- Rehabilitation For Persons With Traumatic Brain Injury - WHO United States Department Of Defence Drucker Brain Injury Centre
- Normal Human Gait- John H. Bowker And Cameron B.Hall

Supporting Modules

- English Story Book
- Getting Started-MS windows 2000 Server
- Windows 95 Programming For Dummies
- Power Point For Windows 95 Step By Step
- Microsoft Windows 95 Internet Kit- Bryan Pfaffenberger