

OT- Program

MAHARASHTRA STATE COUNCIL FOR OCCUPATIONAL THERAPY & PHYSIOTHERAPY, MUMBAI.

Report for Inspection by Local Inquiry Committee

Registration of: Master of Occupational Therapy Course

Academic year: _____

1) Name of the College running M. O. Th. Course :-

Year of Establishment :-

Status :-

Govt./Corporation/Private/Aided/
Non-Aided

Address :-

Email Address :-

2) Name of the Principal/ Dean:-

Qualifications:-

Residential Address:-

Tel No: STD-Code:-..... Off:

Res:-..... Fax:-..... Mobile:-.....

3) Name of the Chairman / Secretary :-

Name of the Management :-

Registration No. of the Trust, Date & Year

Of starting of B.O.Th Course :-

Date & Year of starting of M.O.Th Course:-

Registered Address :-

(Please attach copy of certificate)

4) a) Annual Budget of the trust/society :-

(Please attach copy of last 3 years)

b) Separate Budget of for PG Education (Mandatory) Yes/No

5) Statement of Audited accounts :-

(Please attach copy of last 3 years)

24/5/14

24/5/14

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6) Registration of Maharashtra state Council of OT/PT :- Yes/No
 Date of application for permission for MUHS :-
 Affiliation to the University :-
 Amount Paid :-

7) Period of Existing Affiliation: - Fromto

8) Name of the course already available in the College:

1).....2).....
 3).....4).....

9) a) Whether college is approved by AIOTA :- Yes/No
 Year of approval (Please attach copy)

b) Whether college is approved by Central/State Council :- Yes/No
 Year of approval (Please attach copy)

10) Whether the M.O.Th Degree is recognized
 By AIOTA :- Yes/No
 By Central/ State Council :- Yes/No

11) Space: (Separate Space for P.G. is Mandatory)

U G sq. ft

P G sq. ft.

(800 sq. ft. per specialty desirable)

12) Attached with 300 bedded hospital:

Type of attachment: Qwn / Lease (Please attach documents/ MOU to that effect)/Rented

Name :-

Address:-

No. of Beds: Occupancy:OT referral as per specialty

Facilities: ICUs/Recovery room/ Satellite Service Areas

13) Clinical Facilities: Whether sufficient clinical facilities are available for the P.G. course in order to train the students:

(Students : Patient Ratio-1:2)

Sr. No.	Clinical Facility	Outdoor	Indoor	Deficit/Excess.
1.	<u>O.T. for Physical Restoration</u> a) Musculoskeletal & Hand Section b) Neurology Section c) Cardiovascular & Respiratory Section d) Women Health e) Geriatrics Health			
2.	Fabrication unit for Orthosis , Splints & Self Help Devices			
3.	Ergo therapeutics laboratory for work assessment & work hardening.			
4.	Paediatric & Neonatology O.T unit- S.I., NDT, Infant Stimulation facilities.			
5.	Functional restoration unit – ADL. Mobility & assistive technology.			
6.	Cognitive perceptual laboratory			
7.	Mental Health Section			
8.	<u>Community O.T. (ANY FOUR)</u> <u>Association with</u> a) PHC Centers b) Special Schools/ Main Stream Schools c) NGO disability projects d) Sheltered Workshops e) Day care centers f) Mobile O.T. unit g) Wellness program h) Hospice care			

14) No. of Admissions done in M. O. Th. Course for following subjects:

Sr. No.	Name of the Subjects	M.O.Th-I	M.O.Th-II	M.O.Th-III	Total	NRI
1.	OT in Musculoskeletal Sciences					
2.	OT in Neurosciences					
3.	OT in Developmental Disabilities					
4.	OT in Cardiovascular Respiratory Sciences					
5.	OT in Community Medical Sciences					
6.	OT in Mental Health Sciences					

Intake Capacity:- Per Guide-

15) List of P.G teachers

S.No	Name	Designation	Subject	Experience			UG approval Yes/No	PG approval Yes/No	Council Reg. No.
				UG	PG	Total			

(Attach Bio- data of Principal/ Teachers)

Pay : As per UGC & 6th pay Commission

:- Yes/No

For benefit of students services of visiting faculty can be utilized, so that teaching does not suffer, but these faculty members will not be counted in the PG teachers. They cannot register candidates.-

16) Non - teaching Staff:-

Sr. No.	Designation	Required	Available	Deficit/Exercise
1.	Administrative Officer	01		
2.	P.A./ Typist	01		
3.	Typist/ Clerk	02		
4.	Registration Assistant	01		
5.	Laboratory Assistants	03		
6.	Staff Nurse	01		
7.	Peon / Attendants	02		
8.	Ward boys	Adequate		
9.	Store Keeper	01		
10.	Sweeper	01		

Whether pay scales are as per UGC and 6th pay Commission: -

Yes/ No

17) Name of Equipments available for PG Course in the College in addition to basic equipments list should be attached.

D) OT for Physical Restoration:

1a) Musculoskeletal & Hand Section

Assessment (Minimum any three standardized tests)

- Standardized Hand functions Tests (Any three tests)
- Quality of life scale
- Scale for pain assessment

- Gait Analyzer (desirable)
- MBI, FIM
- Balance scales
- Co-ordination, Speed and dexterity scales
- Motion Analyzer (desirable)
- Video camera (desirable)

Intervention

- Individual Finger Exerciser
- Upper Extremity CPM
- Lower extremity CPM
- Therabands & Theratubes
- Thermo steam
- Isokinetic unit (desirable)
- Fluido Therapy (desirable)
- Advanced Prostheses (desirable)
- Pylon

1b) Neurology Section

Assessment (Minimum any three standardized tests)

- Neuro- behavioral scale
- Canadian Occupational Performance Measure
- Quality of Life Scale
- Sensory Kit
- MBI
- Functional Independence Measure
- Balance Scales
- Coordination Speed and dexterity scales
- Tremometer

Intervention

- EMG Biofeedback
- Treadmill
- Neuro -therapeutic modalities
- Balance training equipments

1c) Cardiovascular Respiratory Sciences Section

Assessment (Minimum any three standardized tests)

- Quality of life scales
- FCE
- BMI
- Endurance assessment scales

Intervention

- Treadmill
- Ergometer
- Aerobics unit (Lower level)

- a) Low stool or stepper
- b) Music System

- Mats for relaxation
- Incentive Spirometry
- Exercise station
- Buhls' Spirometry

1d) Women Health & Geriatrics Section :- As mentioned above and in addition

- Socialization, Art therapy, Recreation and Play room.

II) Fabrication Unit for Orthoses, Splints & Self Help devices

- Oven for High temperature thermoplastic orthoses (desirable)
- Pressure Garments (desirable)

III) Ergotherapeutic Laboratory for work assessment & work hardening

Assessment (Minimum any three standardized tests)

- Work Environment Impact Scale
- Work simulator
- Canadian Occupational Performance Measure
- Assessment on simulated work
- Work sample Test (desirable)

Intervention

- Work cube (desirable)
- Work simulated Training Unit
- Work Sample

IV) Paediatric & Neonatology O.T. Unit

Assessment (Minimum any three standardized tests)

- Oral - Motor Assessments Scales
- Sensory Integration Scales
- Development Assessment Scale
- Gross Motor/ Fine Motor Scale

Intervention

- Sensory Integration equipments
- Proprioceptive - Kinesthetic equipment
- Vestibular equipments
- Tactile games
- Well equipped play games
- Motor planning activities
- Activities for gross & fine motor skills
- Educational toys & games
- NDT equipments
- Infant stimulation toys

V) Functional restorative & assistive Technology, ADL, Mobility & assistive Technology devices**Assessment**

- Scales for ADL Assessment
- Quality of Life
- Canadian Occupational Performance Measure

Intervention

- ADL KIT
- ADL Room
- Adapted stools
- Adapted chairs
- Adapted Wheel chairs
- Adapted canes & crutches
- Adapted Walkers

VI) Cognitive – Perceptual Laboratory**Assessment**

- Cognitive Assessment Scales
- Perceptual Assessment Scales

Intervention

- Targeted games
- Scan board
- Form board or shape sorter
- Scrabble game
- Computer games

VII) Mental Health Section***Assessment (Minimum any three standardized tests)***

- Modified mini mentak status examination
- Quality of Life scale
- IDEA
- Scales for projective technique
- COTE
- Scales for Stress, Anxiety & Depression

Intervention

- Reaction Time machine
- Electromet
- Computer Games
- Maze games
- Constructive Games

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VIII) Community O.T.**Assessment**

- QOL (Quality of Life)
- Disability Evaluation forms
- ADL Forms

(Gazette of India / ICF)

Intervention

- a) Accessibility to Community O.T
- b) Accessibility to Mobile O.T. unit
- Karate Bow
- Therabands & Thera tubes
- Home exercise programme- pamphlets
- Community awareness, educational and counseling material
- Exhibition Material

18) Financial status: Whether additional funding is provided for P.G course by the Managements.

Details: _____

19) Library facilities:

- a) Central Library :-
- b) Departmental Library :-

Yes/No

Yes/No

Sr. No.	Specialty Subjects	No. of Books	No. of Journals
1.	OT in Musculoskeletal Sciences		
2.	OT in Neurosciences		
3.	OT in Developmental Disabilities		
4.	OT in Cardiovascular Respiratory Sciences		
5.	OT in Community Medical Sciences		
6.	OT in Mental Health Sciences		

(Please attach copy of list of books and journals)

- c) Audio Visual Facility :- Yes/No
- d) OHP/ Slide Projector/Computer/LCD Projector :- Yes/No
- e) Medicine, Internet facility available :- Yes/No
- f) X- ray viewers :- Yes/No
- g) Web or digital library account of the university availed :- Yes/No

20) Remarks of the Local Inquiry Committee
(Attach separate sheet if necessary)

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Place:

Date:

Inspection committee:

Sr. No.	Name	Signature
1.		
2.		
3.		

Basic Equipments:

Assessment

1. Goniometers
2. Reflex hammer
3. Tuning Fork
4. Measuring tape
5. BP Apparatus & stethoscope
6. X-ray viewers
7. ADL scale
8. Dynamometer & pinchometer

Intervention:

1. Peg Board (gross-fine)
2. Pronation supination board
3. Sponge roll
4. Inclined & horizontal sand board
5. Sand blocks, weights, pulley & slings
6. Shoulder wheel
7. Twister
8. Theraputty
9. Grip exerciser
10. Weighted cuffs
11. Bicycle fret saw
12. Quadriceps exercises
13. Medicine ball
14. Equilibrium board
15. Parallel bars
16. Walkers (Adult/Paediatric)
17. Tilt table (desirable)
18. Full length mirror
19. Steps
20. Sewing machine/ drill machine
21. Ankle exercises
22. Spinal orthosis
23. UE & LE prosthesis
24. Wheelchairs
25. ADL board
26. Toys (musical/colourful)
27. CP chair/corner chair
28. Bolster/Wedges
29. H-stool
30. Cutout stool/standing table
31. Tricycle/Junior bicycles
32. Therapy ball
33. Tools for orthoses
34. Adaptive equipment
35. TENS (desirable)
36. Stimulator (desirable)
37. Ultrasound (desirable)
38. Games (snake & ladder, dominoes)
39. Puzzles
40. Koch's blocks
41. Electric water Bath.

42. Treadmill.

43. Ergometer

44. Spirometer

45. ~~Simulation~~ Pulse oximeter

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Must
 As per specialty.
 available.
 otherwise may be
 desirable.