



COURSE OUTLINE: GER234 - REHABILITATION

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Approved: Bob Chapman, Chair, Health

Course Code: Title	GER234: REHABILITATION AND RESTORATIVE CARE
Program Number: Name	3041: GERONTOLOGY
Department:	DEAN, HEALTH & COMM. SERV.
Semesters/Terms:	21W, 21S
Course Description:	Learners will focus on the elements of restorative care for clients in the community or long term care facilities. They will understand the need to design, implement, and evaluate programs which are meant to return clients to the highest level of functionality possible.
Total Credits:	3
Hours/Week:	3
Total Hours:	45
Prerequisites:	There are no pre-requisites for this course.
Corequisites:	There are no co-requisites for this course.
Vocational Learning Outcomes (VLO's) addressed in this course:	3041 - GERONTOLOGY
Please refer to program web page for a complete listing of program outcomes where applicable.	VLO 1 Comply with legislation and regulations governing professional practice within the Canadian health care system
	VLO 2 Apply an evidence based perspective to inform current interventions, senior care plan, navigate and advocate for senior care
	VLO 3 Consider the availability and effectiveness of community resources and referrals to plan, navigate and advocate for senior care
	VLO 4 Analyze the strengths and needs of seniors independently or with an inter-professional team to plan, implement and evaluate programs
	VLO 5 Assess the communicative, mental, physical, emotional and social health of older adults to promote healthy aging
	VLO 6 Communicate effectively to promote person and family centered care and strengthen inter-professional collaborative practice
	VLO 7 Appraise the important role of the ``elder-advocate`` who works pro-actively as an individual or in inter-professional teams and the impact they have on elderly clients` healthy aging
Essential Employability Skills (EES) addressed in this course:	EES 1 Communicate clearly, concisely and correctly in the written, spoken, and visual form that fulfills the purpose and meets the needs of the audience.
	EES 2 Respond to written, spoken, or visual messages in a manner that ensures effective communication.
	EES 4 Apply a systematic approach to solve problems.
	EES 5 Use a variety of thinking skills to anticipate and solve problems.
	EES 6 Locate, select, organize, and document information using appropriate technology

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and information systems.

- EES 7 Analyze, evaluate, and apply relevant information from a variety of sources.
- EES 8 Show respect for the diverse opinions, values, belief systems, and contributions of others.
- EES 9 Interact with others in groups or teams that contribute to effective working relationships and the achievement of goals.
- EES 10 Manage the use of time and other resources to complete projects.
- EES 11 Take responsibility for ones own actions, decisions, and consequences.

Course Evaluation:

Passing Grade: 50%,

A minimum program GPA of 2.0 or higher where program specific standards exist is required for graduation.

Books and Required Resources:

Restorative care nursing for older adults by Resnick, B.
Publisher: Springer Publishing Company Edition: 2nd
ISBN: 9780826124548

Course Outcomes and Learning Objectives:

Course Outcome 1	Learning Objectives for Course Outcome 1
1. Define rehabilitation and restorative care services.	1.1 Recognize the historical factors that supported Dr. Frank Krusen in his 1929 efforts to address rehabilitation as a specialty health program in the US. 1.2 Identify potential membership for the rehabilitation care team: higher level experts evaluate and design a program for an older person who is in need of strategies to help him reach his optimal level of functioning. 1.3 Identify potential restorative care providers: individuals who work in direct service with an older person to execute program strategies for reaching optimal level of functioning.
Course Outcome 2	Learning Objectives for Course Outcome 2
2. Explore setting options for care of the elder in need of rehabilitation/restorative services.	2.1 Consider the cost associated with providing rehabilitative and restorative services to Canadians elders over the age of 65 over the last 5 years. 2.2 Explore setting options for providing these services at the highest quality and in the most efficient ways. 2.3 Consider the advantages and disadvantages for providing/receiving rehabilitation/restorative services in each of the settings identified (personal home in the community, nursing home, assisted living facility, acute care hospital, and via technology/telehealth). 2.4 Identify assessment factors that must be considered in identifying the best setting for the older person receiving rehabilitation and/or restorative services.
Course Outcome 3	Learning Objectives for Course Outcome 3

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<p>3. Identify health improvements documented in the literature that have been strongly associated with elder participation in physical activity programming.</p>	<p>3.1 Explore the research literature to determine physiological benefits for older persons participating in a tailored physical activity program.</p> <p>3.2 Explore the research literature to determine psychological benefits for older persons participating in a tailored physical activity program.</p> <p>3.3 Explore the research literature to determine attitudinal benefits for older persons participating in a tailored physical activity program.</p> <p>3.4 Explore anecdotal data from older persons who have participated in some tailored physical activity programming as to its impact on them as individuals.</p>
<p>Course Outcome 4</p>	<p>Learning Objectives for Course Outcome 4</p>
<p>4. Recognize components of the function-focused ecological model of care (FFC) as a basis for understanding complex interrelationships among intrapersonal, interpersonal, environmental, and policy issues involved in rehabilitation/restorative health care of an older patient.</p>	<p>4.1 Identify the purpose of using the FCC Social Ecological Model (FCC Model).</p> <p>4.2 Identify intrapersonal factors that can lead to limitations in older adults.</p> <p>4.3 Identify interpersonal factors in the FCC Model that impact its use when planning for older adults (Motivation and Self-Efficacy)</p> <p>4.4 Recognize the important contributions that the environment and policy issues play in the development of the FCC Model for elder care.</p> <p>4.5 Differentiate between modifiable and non-modifiable factors identified as a part of the FCC Model.</p> <p>4.6 Address how components of the FCC Model are interrelated across the service continuum for rehabilitation and restorative care.</p> <p>4.7 Recognize the two most commonly noted psychosocial factors influencing elder functioning (fear of falling and depression) that need to be considered when care planning for the older person.</p>
<p>Course Outcome 5</p>	<p>Learning Objectives for Course Outcome 5</p>
<p>5. Identify how to move from a theoretical to an implementation frame for function-focused care of elderly patients.</p>	<p>5.1 Recognize that the FCC Model serves only as an outcome framework for viewing the older person in the realm of optimal level of functioning.</p> <p>5.2 Regularly use data from patient/family/significant others and multi-disciplinary team members to maintain a current broad based profile when developing an elder's FCC Model for care.</p> <p>5.3 Recognize that planned environmental interventions are</p>

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	<p>useful to ensure needed resources are present in effort to optimize outcomes.</p> <p>5.4 Provide one example of a planned environmental intervention for an older client.</p> <p>5.5 Describe the relationship between environment strategies and agency/provider policies for providing function-focused care of older persons.</p> <p>5.6 Maximize appropriate environmental artificial intelligence resources in planning, implementing and evaluating function-focused elder care services.</p> <p>5.7 Realize that implementation of a function-focused care philosophy is directly tied to the type of care setting and situation of the older person as patient.</p>
Course Outcome 6	Learning Objectives for Course Outcome 6
6. Explain how Motivation and Self-Efficacy Theories can be used at the interpersonal level to guide interventions for building confidence levels in both older patients and their caregivers.	<p>6.1 Using current studies in the research literature, explore the relationship between self-efficacy, motivation, and confidence building.</p> <p>6.2 Understand that although motivation can be seen as a part of personality, it can also be influenced by variables external to the individual.</p> <p>6.3 Identify some external variables that can impact an older person's motivation to comply with use of anti-depressive medications as prescribed.</p> <p>6.4 Explore the association between self-efficacy and sustainability behaviors.</p> <p>6.5. Identify that self-efficacy expectations are dynamic, and are both appraised and enhanced by four mechanisms (successful experiences, verbal encouragement, watching others perform a specific activity, and the desire to decrease unpleasant sensations associated with that specific activity) that can serve to encourage functional change in the older person.</p>
Course Outcome 7	Learning Objectives for Course Outcome 7
7. Identify strategies to obtain current data about elders in to aid providers in planning, designing, implementing, and evaluating rehabilitation/restorative services of care.	<p>7.1 Recognize the importance of maintaining a client-centered perspective when identifying components of this Model to the delivery of care/services.</p> <p>7.2 Document and date elder care plan work with evidence of timelines as well as formative evaluations for both short and long term outcome goals.</p> <p>7.3 Utilize technology related calendar reminder cuers for individual elder record updating.</p>

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	<p>7.4 Encourage utilization of interpersonal social support networks (family, friends, peers, providers, community agencies) in all phases of the older person's rehabilitative/restorative care services.</p> <p>7.5 Regularly schedule a client-centered case conference to aid in transparency for planning, designing, implementing and evaluating efforts at meeting elder outcomes in care.</p> <p>7.6 Collect patient data about deficits and functional impairments as well as data that reflects functional potential and strengths of the older person.</p>
Course Outcome 8	Learning Objectives for Course Outcome 8
8. Explore a five-step-approach to implement function-focused care for elders with cognitive impairment.	<p>8.1 Recognize that all older adults are capable of and benefit from some improvement or maintenance of functional potential, even though the function may not be entirely independent (i.e. passive range of motion).</p> <p>8.2 Identify some environmental factors that may influence physical activity component of function-focused care in cognitively impaired elders.</p> <p>8.3. Review the literature to find research studies that identify documented benefits for cognitively impaired elders who participate in function-focused rehabilitative/restorative care. (i.e. improving balance)</p> <p>8.4 Identify some barriers/challenges to providing function-focused care programming for elders with cognitive impairments.</p> <p>8.5 Name each of the five steps in the five-step-approach for implementing function-focused care for older persons with cognitive impairment who are in need of rehabilitation/restorative services.</p> <p>8.6 Identify gold standard instruments that have been used with moderate to severe cognitively impaired elders to assess cognition, physical function, and behavior states.</p> <p>8.7 Adapt communication techniques to encourage and motivate the cognitively impaired elder to participate in functional activities by using short, simple verbal cues while providing direct eye contact.</p> <p>8.8 Utilize sensory stimulation techniques (visual, auditory, olfactory, gustatory, and tactile) at appropriate levels for the older cognitively impaired person to optimize their physical activity and functioning.</p>
Course Outcome 9	Learning Objectives for Course Outcome 9
9. Consider ethical issues	9.1 Define ethics in the context of elders who present with

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	<p>associated with function-focused care among elders who present with difficult behaviors.</p>	<p>cognitive impairments.</p> <p>9.2 Identify key biomedical ethical principles as outlined by Beauchamp and Childress.</p> <p>9.3 Name three universal moral concerns that although they relate to all human beings, hold special meaning for elders who display difficult behaviors.</p> <p>9.4 Identify discipline specific code of ethical practice directives that serve as a guide for professionals who practice in function-focused care with older persons.</p> <p>9.5 Explain the relationship between ethical codes of practice and patient safety.</p> <p>9.6 Recognize the importance of acknowledging the value of having a patient bill of rights, resident bill of rights, and other such documents in elder care settings.</p> <p>9.7 Respond in an appropriate ethical manner to an elder case study using the Realm-Individual Process-Situation (RIPS) Model.</p> <p>9.8 Identify resources to assist the health care provider in understanding all the ethical issues restricting elder functioning through use of protective measures and restraints in rehabilitative/restorative care settings.</p>
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Evaluation Process and Grading System:

Evaluation Type	Evaluation Weight
Reflections (4 - 5% each)	20%
Test 1 (midterm)	40%
Test 2 (final)	40%

Date: December 11, 2020

Addendum: Please refer to the course outline addendum on the Learning Management System for further information.

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