



DEPARTMENT OF PHYSICAL THERAPY VISION

International leadership in education and research in Physical Therapy and Rehabilitation Science.

DEPARTMENT OF PHYSICAL THERAPY MISSION

To educate future and current physical therapists, advance practice, foster leadership, contribute to our communities and improve the health of individuals and populations through the discovery, application and exchange of knowledge.

PROGRAMS

Master of Science in Physical Therapy

The Master of Science in Physical Therapy is a professional program leading to entry to practice, accredited by Accreditation Council for Canadian Physiotherapy Academic Programs (ACCPAP). Graduates will be eligible to write the Physiotherapy Competency Examination (PCE) of the Canadian Alliance of Physiotherapy Regulatory Boards, which qualifies them to practice physical therapy in Canada. Graduates will be eligible to register in the Canadian Physiotherapy Association and the Colleges of Physiotherapy in all Canadian provinces. As the MScPT program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) of the American Physical Therapy Association (APTA), graduates are also eligible to apply for licensure in the United States.

Master's of Science in Physical Therapy Advanced Standing Option

The Master of Science in Physical Therapy Advanced Standing Option is a professional graduate degree program that allows physical therapists (with advanced standing) to acquire the entry-to-practice degree on a part-time basis in an online, learning environment with two on-campus residencies. Themes of research, business, and professional practices are integrated throughout the curriculum. Students complete a group research project during this one-year program. The Department of Physical Therapy, University of Toronto, will consider applications from students who have completed a four-year undergraduate program BScPT degree in Canada (or Quebec equivalent) with a minimum mid B average.

Degrees of MSc/PhD (Rehabilitation Science)

The MSc and PhD degree programs in Rehabilitation Science are research-oriented programs for students with a professional physical therapy degree; they do not prepare students for physical therapy, clinical practice, or licensure. The primary objective of the MSc and PhD programs is to prepare students for research careers in Rehabilitation Science. (For further details, see rehab.science@utoronto.ca.)

HISTORY OF THE DEPARTMENT OF PHYSICAL THERAPY

The first program in Physical Therapy in Canada was established in the Department of Extension at the University of Toronto in 1929. It was a two-year program followed by six months of clinical practice, leading to a diploma in Physiotherapy. In 1946, the two-year program was lengthened to three years with three months of clinical practice. It remained in the Department of Extension and a diploma was granted in Physiotherapy.



In 1950, the program was transferred into the Faculty of Medicine and combined with Occupational Therapy. The impetus behind combining the programs was financial; in the period following World War II, hospitals often did not have the financial resources for two separate positions. It was also thought that the two professions had a great deal of similarities and the combination of the two would produce a more diversified professional. This program was three years in length with eight months of clinical practice to be completed before graduates could be recognized by the professional associations. Graduates achieved a diploma of Physical and Occupational Therapy.

The combined program continued until 1971, when a four-year Bachelor of Science in Physical Therapy was introduced in the Department of Rehabilitation Medicine, Faculty of Medicine. At this time, 16 weeks of clinical practice were required in two eight-week Modules. The program underwent continual modification throughout the years.

In 1993, the Division of Physical Therapy became the Department of Physical Therapy, thereby achieving increased autonomy over the curriculum and the direction of the program. The four-year direct-entry program consisted of Basic Science courses, Clinical Science courses, Core Physical Therapy courses, seven and a half electives from Arts and Science, and a total of thirty weeks of clinical practice. This curriculum was referred to as the "Classic Curriculum."

As of 1995, the program became a second-entry level program, three years in length, leading to a Bachelor's of Science in Physical Therapy (BSc(PT)). The program emphasized evidence-based practice, critical thinking and integration of basic and clinical sciences. The program provided a unique exposure to a variety of educational strategies within the University and the community.

The Master's of Science in Physical Therapy (MScPT) started in 2001 and replaced the BScPT program. The first class graduated in November 2003. The program was consolidated into 24 months, from the original 26 months, effective in the fall of 2007. The MScPT is a professional program that requires the completion of a four-year undergraduate degree for admission. It enhances and expands upon the foundations of the Evidenced-Based Curriculum through implementation of the enhanced Best Practices. The purpose of the Master's of Science in Physical Therapy is to graduate academic physical therapy practitioners who will demonstrate:

1. Best Practices

- share their knowledge with students, clients, policy makers, and other professionals in academic health science environments - have enhanced competency in clinical skills
- participate in clinical and health care research, contributing to the overall body of scientific knowledge
- be cognizant of advanced technological practice

2. Professionalism

- have ability to act as self-regulating professionals who exhibit strong personal, moral, and ethical values



- be cognizant of the changing laws, codes, and guidelines that impact on themselves and their clients
 - be creative entrepreneurs with sound business acumen capable of excelling in professional practice in a wide variety of venues
3. Leadership
- serve as role models for students and other health professionals as expert consultants in the fields of movement and physical capacity
 - serve as strong players with exemplary interpersonal skills, secure in their evolving role within changing health service delivery
4. Citizenship
- be innovative leaders in physical therapy, rehabilitation, and the health system
 - be strong negotiators and advocates who proactively address interprofessional politics and health policy with an eye to maintaining and improving not only the health of clients but of the health system as a whole

The program is now in the process to adapt to the objectives in the Essential Competency Profile for Physiotherapists in Canada (the Profile) to prepare students with seven physiotherapist roles. It is expected that upon graduation, our graduates will well understand the seven roles and be prepared for life long pursuit of excellence, innovation, and mastery in physiotherapy.

Expert - As experts in function and mobility, physiotherapists integrate all of the Physiotherapist Roles to lead in the promotion, improvement, and maintenance of the mobility, health, and well-being of Canadians.

Communicator - Physiotherapists use effective communication to develop professional relationships with clients, families, care providers, and other stakeholders.

Collaborator - Physiotherapists work collaboratively and effectively within an interprofessional team to achieve optimal client care.

Manager - Physiotherapists manage time, resources, and priorities at all levels for individual practice and to ensure sustainable physiotherapy practice overall.

Advocate - Physiotherapists responsibly use their knowledge and expertise to promote the health and well-being of individual clients, communities, populations and the profession.

Scholarly Practitioner - Physiotherapists are committed to ongoing learning for the purpose of improving client outcomes through seeking, creating, applying, disseminating, and translating knowledge to physiotherapy practice.

Professional - Physiotherapists are committed to the best interests of clients and society



through ethical practice, support of profession-led regulation, and high personal standards of behaviour.

PHILOSOPHY OF THE BEST PRACTICES CURRICULUM

The MScPT program values client-centred care and a comprehensive approach to assessment. It uses several models including the International Classification of Functioning, Disability and Health (ICF) and the Movement Continuum Theory. The curriculum is committed to the development of highly competent academic practitioners who will be equipped with the knowledge, skills and attitudes to provide best practices in both private and public funded environments. This competence will entail acting on the professional principles and general strategies embedded in the practice of Physical Therapy. Central to the goals of the program is the assumption that graduates will be able to gather and analyze evidence, identify professional issues, render sound decision-making, exercise good judgment and engage in evidence-based practice. Graduates will practice in unique, complex situations that demand insights and understanding of conflicting values and ethical stances in varied social, cultural and organizational contexts. They will be expected to develop confidence, competence and ethical sensitivity towards individuals and groups and demonstrate these attributes in their clinical practice.

The MScPT program at the University of Toronto is also consistent with the Entry to Practice Physiotherapy Curriculum content guidelines for Canadian University Programs. The diagram adopted by the Vancouver work groups fits very well with the University of Toronto educational principles.



The foundational sciences, notably anatomy and neuroanatomy, neurophysiology and biomechanics are integrated within each of the clinical units, as are the themes of Ethics and Professionalism, Health and Wellness across the continuum, Business Management, Pain, and

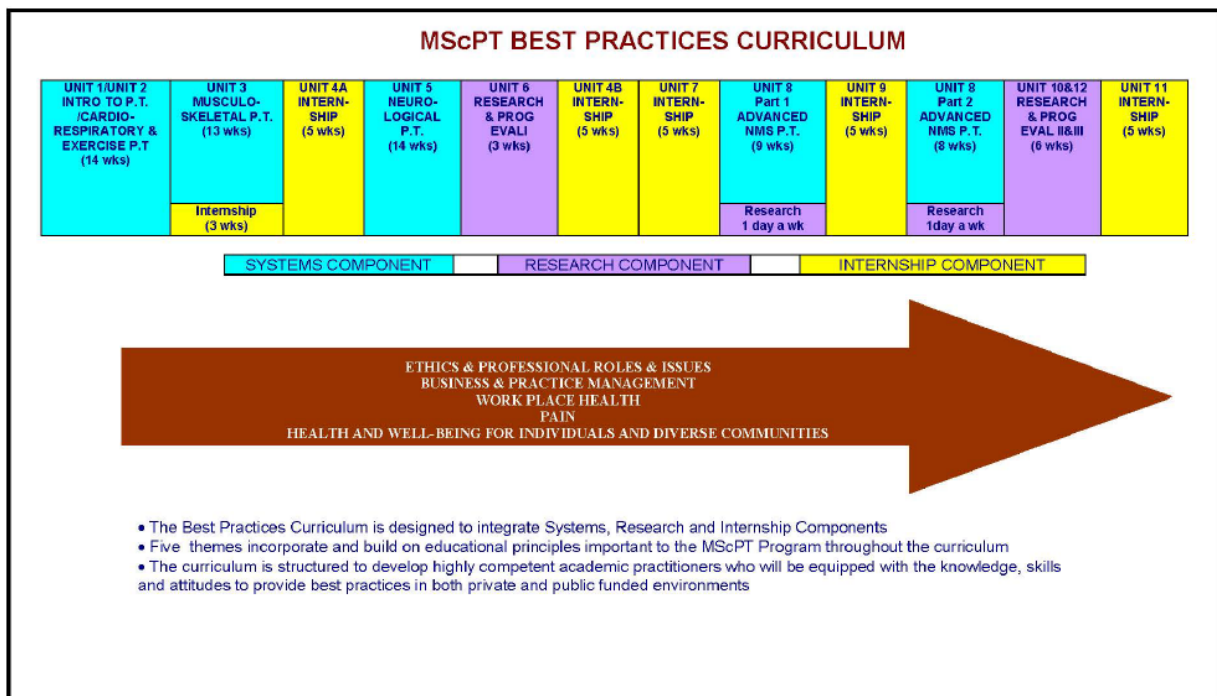


Workplace Health. Students practice initially in laboratories at 500 University but are provided cases to introduce context. Within each clinical unit, there are structured clinical visits that introduce professional interactions within the context of practice throughout the unit. The Research Units are largely focused on practice questions with significant input from clinicians in the community. Integration of these aspects is a key educational principle. Faculty work very hard to communicate well amongst themselves and to provide students with meaningful educational experiences.

Multiple Educational Strategies

Professional education requires students to engage in diverse and varied learning experiences and types of evaluation. The complexity of the learning experience evolves throughout the program. The program also has diverse educational methods (interactive lectures, labs, small groups, self directed learning, independent assignments) to meet the varied learning styles of the students enrolled in the program. Students are encouraged to develop as adult life long learners or scholarly practitioners with a sense of responsibility for their education and professional development. Collaborative learning experiences are fostered with students, faculty, physical therapy practitioners and other members of the health care system.

Structure



The MScPT Best Practices Curriculum is designed to integrate Systems, Research and Internship Components organized in twelve units to maximize educational principles.



Components

1. **Systems Component:** (Units 1&2, 3, 5 and 8). This component is designed to provide the basic and clinical sciences of physical therapy; the principles of assessment, management, measurement and outcomes of evidence-based practice for the major systems that are integral to the practice of physical therapy. Therapeutic approaches are incorporated into the curricular design. These include: health promotion and disability prevention, therapeutic intervention, minimization of disability and optimization of ability, and restoration of functional capacity.
2. **Research Component** (Units 6, 10 and 12). This component is designed to integrate practice in physical therapy with research and program evaluation. The focus of this unit is on developing student's skills in critical appraisal, critical thinking and problem solving. A research project is introduced as part of the requirement of the program, under supervision of a practitioner and an academic faculty. The project will be presented at a formal Research Day.
3. **Internship Component:** (Units 4a&b, 7, 9 and 11). This component is designed to provide the opportunity to integrate the professional systems and research components while continuing to learn in practice settings, and develop clinical competence.

Unit Weights

Compulsory Courses	Credits	Marking Designation
PHT1001H - Intro to Professional PT Practice, Evaluation and Research	0	H/P/FZ
PHT1002Y - Cardiorespiratory & Exercise Physical Therapy Practice	3.00	GRADE
PHT1003Y - Musculoskeletal Physical Therapy Practice	3.00	GRADE
PHT1004Y - Clinical Internship - Cardiorespiratory	0.75	H/P/FZ
PHT1014Y - Clinical Internship - Musculoskeletal	0.75	H/P/FZ
PHT1005Y - Neurological Physical Therapy Practice	3.50	GRADE
PHT1006Y - Research & Program Evaluation for Physical Therapy Practice I	0.75	H/P/FZ
PHT1007Y - Clinical Internship - Neuroscience	0.75	H/P/FZ
PHT1008Y - Advanced Neuromusculoskeletal Physical Therapy Practice	2.75	GRADE
PHT1009Y - Clinical Internship - Musculoskeletal II	0.75	H/P/FZ
PHT1010Y - Research & Program Evaluation for Physical Therapy Practice II	0.75	H/P/FZ
PHT1011Y - Clinical Internship - Selective	0.75	H/P/FZ
PHT1012Y - Research & Program Evaluation for Physical Therapy Practice III	1.00	GRADE
Overall Total (Years 1 & 2)	18.50	

Units of Instruction

Units 1 and 2 - PHT1001H and PHT1002Y

(Introduction and Cardiorespiratory & Exercise Physical Therapy Practice, 14 weeks)

In this unit, students are introduced to the field of Physical Therapy, disability studies and how science, practice, evaluation, research, business and ethics are integrated into the field. This unit also integrates the principles of cardiopulmonary anatomy and physiology, exercise physiology, clinical pathobiology and dysfunction with the assessment, analysis and



management of clients with acute or chronic respiratory and/or cardiovascular conditions. The content in this unit is critical to the holistic and comprehensive management of all clients. Evaluation of practice and clinical problem solving provide opportunities to develop an understanding of both the science and practice of Physical Therapy.

Unit 3 - PHT1003Y

(Musculoskeletal Physical Therapy Practice, 16 Weeks)

This unit introduces the principles of assessment and treatment of the musculoskeletal system based on an approach that integrates scientific and biomechanical principles with basic clinical skills. Content includes connective tissue structure and pathophysiology as they relate to musculoskeletal disorder, a systematic study of joints (peripheral and central), posture and gait. Professional and ethical practice issues are expanded from topics in Unit 2 and integrated throughout the unit. Learning strategies include small-group work, seminars, lectures, structured independent study units, clinical skills laboratories, tutorials and structured clinical sessions. This unit also includes a three week clinical internship focusing on mobility, transfers, interviewing, interacting with patients and health care teams while demonstrating safe and professional practice.

Unit 4 - PHT1004Y

(Clinical Internship – Cardiorespiratory & Exercise Physical Therapy Practice, 5 weeks)

This clinical unit provides the opportunity for students to integrate the theory and science into the practice of Physical Therapy, focusing on general Physical Therapy practice including themes of exercise and cardiorespiratory Physical Therapy practice. Students who have successfully completed all components of the program up to Unit 4 are given the opportunity to apply their skills in a clinical setting. Students will be required to spend five full-time weeks in approved Physical Therapy sites coordinated by the Director of Clinical Education & Community Affairs.

Unit 4 - PHT1014Y

(Clinical Internship – Basic Musculoskeletal Physical Therapy Practice, 5 weeks)

This clinical internship unit provides the opportunity for students to integrate the theory and science into the practice of Physical Therapy, focusing on themes of mobility and basic musculoskeletal Physical Therapy practice. Students who have successfully completed all components of the program up to Unit 4 are given the opportunity to apply their skills in a clinical setting. Students will be required to spend five full-time weeks in approved physical therapy sites coordinated by the Director of Clinical Education & Community Affairs.

Unit 5 – PHT1005Y

(Neurological Physical Therapy Practice, 14 weeks)

Unit 5 integrates the science of neuroanatomy, neurophysiology and neuropathology with the principles of movement dysfunction to the assessment, analysis and management of clients with neurological disorders. A client-centred approach to the management of neurological conditions is promoted, across the lifespan, based on the best available evidence. Also emphasized is a multidisciplinary approach to the care of clients with neurological dysfunction. Students are exposed to the various roles of the multidisciplinary team throughout the course



content. Learning strategies include small group work reviewing cases as well as lectures, clinical skills laboratories, structured clinical sessions and independent study time.

Unit 6 – PHT1006Y

(Research and Program Evaluation for Physical Therapy Practice I, 3 weeks)

This is the first of three units integrating practice in physical therapy with research and program evaluation. The focus of this unit is on further developing student's skills in critical appraisal, critical thinking and problem solving. Students will be introduced to a wide range of research designs currently being applied in the field of physical therapy spanning both qualitative and quantitative methodologies. Learning strategies include seminars, small group work, in-depth analysis of the literature and both written and oral presentations. Students will develop their protocol for a clinical research project, which will be conducted in the remainder of the year.

Unit 7 – PHT1007Y

(Clinical Internship – Neurological Physical Therapy Practice, 5 weeks)

This clinical unit provides the opportunity for students to integrate the theory and science into the practice of Physical Therapy, focusing on neurological Physical Therapy practice. Students who have successfully completed all components of the program up to Unit 7 are given the opportunity to apply their skills in a clinical setting. Students will be required to spend five full-time weeks in approved Physical Therapy sites coordinated by the Director of Clinical Education & Community Affairs.

Unit 8 – PHT1008Y

(Advanced Neuromusculoskeletal Physical Therapy Practice, 17 weeks)

This unit will provide students with the opportunity to expand their knowledge relating to the pathophysiology and management of selected neuromusculoskeletal conditions and to further develop basic physiotherapeutic skills in assessment and management of neuromusculoskeletal conditions. The unit promotes a client centred approach to management and a progressive professional perspective by providing strategies and opportunities for the integration of knowledge from across the curriculum. Learning strategies include lectures, laboratories, small group work and structured clinical sessions. The unit is divided into two sections with an internship in the middle to enhance skills (Unit 9).

Unit 9 - PHT1009Y

(Clinical Internship – Advanced Musculoskeletal Physical Therapy Practice, 5 Weeks)

This clinical unit is embedded within Unit 8 to provide the opportunity for students to integrate the theory and science of the field of neuromusculoskeletal into practice. The foci will be on the development of advanced clinical neuromusculoskeletal skills as they relate to the complex client and evolution towards the advanced practitioner. Students will be required to spend five full-time weeks in approved Physical Therapy sites coordinated by the Director of Clinical Education & Community Affairs and faculty.

Units 10 & 12 – PHT1010Y & PHT1012Y

(Research and Program Evaluation for Physical Therapy Practice II & III, 6 weeks)



The Unit 10 Research Internship gives students the opportunity to develop and apply knowledge, skills and behaviours relevant to their research focusing particularly on the data analysis, interpretation of findings and writing components of their project. Learning strategies include seminars, self-directed group work and individual consultation with research faculty and advisors. At the completion of this unit, students complete and submit a draft of their final paper and a poster that they will use for knowledge exchange.

In Unit 12, the students will focus on the dissemination of the results of their research projects in written and oral formats. In addition, students will learn about the principles of knowledge transfer regarding research findings. The primary goals of the unit are for the students to develop a scientific poster presentation of their projects results that will be presented at a formal Research Day. Students will also complete the writing of a major paper according to the publication guidelines for a research article for a scientific journal. There is also an emphasis on specific ethical/professional and health system issues for the graduating physical therapist.

Unit 11 – PHT1011Y

(Clinical Internship – Selective Physical Therapy Practice, 5 weeks)

This clinical unit provides the opportunity for students to integrate the theory and science into the practice of Physical Therapy, focusing on the varied roles of the Physical Therapist across the health care system. Students who have successfully completed all components of the program up to Unit 11 are given the opportunity, in this final clinical internship, to apply their skills in a particular interest area of clinical practice or an area needed for completion of the program (e.g. geriatrics). Students will be required to spend five full-time weeks in approved Physical Therapy sites coordinated by the Director of Clinical Education & Community Affairs.

Selective Unit: PHT 1015Y

(Clinical Internship – Physical Therapy Practice, 5 weeks)

This clinical unit provides the opportunity for students to integrate the theory and science into the practice of Physical Therapy, focusing on a specific area of Physical Therapy. It may replace any of PHT1004Y, PHT1014Y, PHT1007Y, PHT1009Y, or PHT1011Y. Students who have successfully completed PHT1001H, PHT1002Y, PHT1003Y are given the opportunity to apply their skills in a clinical setting. Students will be required to spend five full-time weeks in approved Physical Therapy sites coordinated by the Director of Clinical Education & Community Affairs.