

PROSPECTUS DETAILS FOR PGDEI COURSE

PROGRAMME CODE	:	PGDEI.
PROGRAMME NAME	:	POST GRADUATE DIPLOMA IN EARLY INTERVENTION.
RECOGNITION STATUS CERTIFICATE APPROVAL (2019-20 TO 2023-24)	:	RECOGNIZED BY RCI
AFFILIATION STATUS ALONG WITH (NAME OF UNIVERSITY)	:	UNIVERSITY OF MADRAS
LEVEL OF PROGRAMME	:	POST GRAUATE DIPLOMA
DURATION OF THE PROGRAMME	:	1 year
PATTERN OF PROGRAMME	:	SEMESTER PATTERN
SANCTIONED INTAKE	:	15 seats
RESERVATION CRITERIA	:	SC-3,ST-0,BC-5,MBC-3,UR-4.
MEDIUM OF INSTRUCTION	:	ENGLISH

ELIGIBILITY: -

Candidates who have passed Candidates who have passed:

- M.B.B.S./BAMS/BUMS/BSMS/BNYS or Equivalent Degree
 - BOT/BPT/BASLP/B.Ed.-SE/ or Equivalent Degree
 - B.Sc. Nursing
 - Post Graduate in Psychology/Social Work/Special Education/Child Development or Equivalent Degree
- with 50% aggregate marks or case of general candidates and 40% marks in case of SC and ST

candidates are eligible to apply for this course.

ADMISSION CRITERIA: -Rank list will be calculated by

❖ Considering-60%of the EC mark	-	60 marks
❖ Rural student	-	5 marks
❖ Parent/siblings/ward of PWD	-	10marks
❖ Higher qualification	-	05marks
❖ Interview	-	20marks
❖ Total	-	100 marks

SYLLABUS: -

Paper I: NEUROBIOLOGY

No. of hrs.100

No. of marks:80

OBJECTIVES:

1. To understand the biological basis of developmental disabilities.
2. To identify the causes and risk factors, developmental disabilities and understanding their Implication on development and their prevention aspects of disability.
3. To have knowledge the early indication of brain insult and characteristic features of developmental Disabilities for early identification.

UNIT I : Anatomy and Embryology of the Nervous system

- Gross anatomy stages of development, Micro anatomy stages of development and Centres & pathways

Unit II: Physiology and Maturation of the Nervous System

Neurons, synopsis, transmission, Myelination, Organization of brain, Cortical &subcortical relaysystem, Processing of information (Figuration, organization, response, integration).

UNIT III: Functions of the Nervous System including special senses

- Determinants of risk factors – Preconceptual, Prenatal, Natal, Post-natal and Psychosocial.
- Developmental abnormalities - Structural abnormalities, Biochemical abnormalities and Behavioural abnormalities.
- Neurohabilitation – concepts, theories, plasticity, imprinting, critical periods and Neuronal Repair.

Unit V: Neurofunctional indicators of early brain insults

- Presenting symptoms - Epilepsy, sleep disturbance, level of activity, Clinical features and Investigative procedures - Genetic, Biochemical Pathology, Imaging techniques.

Unit VI: Prevention of developmental disabilities

- Prenatal, natal, post-natal, Prevention including genetic counselling.

Paper II: Child Development and Learning

No. of hrs.100

No. of marks: 80

OBJECTIVES:

1. To equip with ability to apply theories of child development with emphasis on cognitive, Motor, social, emotional and language development.
2. To understand a typical development and their implications on the development of the Child.
3. To understand the influencing factors that affect child development.

Unit I: Growth and Nutrition

- Growth - Principles of growth, Normal growth pattern, Growth monitoring, Factors influencing growth, and Health and child rearing practices.
- Nutrition - Nutrition - effect on growth, Nutrients, Feeding & weaning, Balanced diet

UNIT II: Motor development and Sensory Perceptual development

- Motor development - Principles of motor development, Motor development in prone, supine

sitting& standing, posture, tone, movement, joints, Gait, Fine motor development, Gross Motor development for survival, protection and learning and atypical development.
- Sensory Perceptual development - Sensation, Perception and Specific sensory perceptual development.

UNIT III: Cognitive Development and child rearing

- Theories of cognitive development, influencing cognitive development. Stages of cognitive development and Factors.
- Safety management practices, nutrition and health practices, immunization, Home Environment, Implications of social and cultural practices.
- Implications of medical conditions on child development - medically fragile babies, childhood illnesses and diseases

UNIT IV: Social and Emotional Development

- Concepts and theories of social and emotional development.
- Mother child intervention, temperaments, attachment factors influencing social and emotional development.
- Signs of emotional distress, child abuse and neglect.

UNIT V: Speech language communication development

- Development of auditory behaviour, Definition and description of terms, Integrated framework for language development, Process of normal language acquisition, Language and Cognition.

.

Paper III: Assessment, Intervention and Evaluation

No. of hrs.100

No. of marks:80

OBJECTIVES:

1. To acquire the ability to assess children's cognitive, social, emotional, communication, Motor development.
2. To acquire the ability to select and use a variety of assessment instruments/tools and Procedures.
3. To acquire ability to diagnose and communicate to parents and families.
4. To acquire ability to develop, implement and evaluate individualized Early Intervention Programme.

Unit 1: Assessment

- Introduction to Assessment – Definition, purposes, methods of collecting data.
- Informal and formal assessment tools/instruments — Norm references, criterion referenced, curriculum referenced observational methods

Unit II : Administration Assessment tool

- Family centred assessment, Involving Families as active participants in assessment progress.
- Introduction to assessment tools used in early intervention, selection of assessment tools, Administering and communicating assessment results.

Unit III: Individualised Early Intervention Programming

- Development and implementation of the individualised early intervention programme (IEIP) and individual family service plan IFSP.

Unit IV Intervention strategies

Prompting and fading, modelling and imitation, demonstration,

Task analysis, shaping and chaining, reinforcement - types of reinforcers, schedules of Reinforcement, music and play activities, peer tutoring.

Unit III: Evaluation

- Definition of evaluation, difference between assessment and evaluation.

- Types of evaluation - formative, summative.

- Programme monitoring, summarizing and evaluating the acquisition of child and family Outcomes.

Paper: IV Therapeutics

No.of hrs.100

No. of marks:80

OBJECTIVES:

1. Identify deviations in specific areas of development.
2. To acquire ability to assess and communicate assessment results to parents and families.
3. To acquire ability to develop implement and evaluate individualized therapeutic Programme.
4. Identify appliances/assistive devices.

Part: A Physiotherapy

Unit I: Concepts, theories, Assessment and Intervention

- Concepts, theories, principles in physiotherapy.
- Examination of motor system and determining need for therapy.
- Identifying therapeutic goals, techniques of intervention, methods of evaluation & record keeping.
- Intervention for multiple handicaps.
- Use of aids and appliances.
- Intervention for multiple handicaps

Unit II: Recent trends and issues.

- Organization of services (urban, rural), Multidisciplinary teamwork, Available resources and utilization, Social adaptations (culture appropriate).

Part B: Occupational Therapy

Unit I: Concepts, theories, assessment and intervention

- Physiological frame of reference, Cognitive frame of reference, Psycho dynamic frame of reference and Humanist frame of reference.
- Performance components, Sensory processing, Motor performance (Posture, hand function, etc.), Occupational components, Breathing, Feeding and Play.
- Determining need for therapy(Setting therapy goals, Selecting techniques and Identifying appliances / assistive)

Unit II: Recent trends and issues:

- Organization of services, Multidisciplinary team, Available resources & utilization and local adaptations (culture appropriate).

Part C - Speech, Language and Communication**Unit I : Theories, concepts, assessment and evaluation**

- Orientation to common auditory disorders in children - identification & screening of hearing loss in children, referral process, basic hearing aid usage, auditory training
- Language and Communication problems association with motor disorders, sensory deficits, CNS dysfunction, cognitive~ disorders, etc.
- Assessment, intervention and evaluation.
- Initial & ongoing assessments - strategies, linking assessment and intervention, multi axial procedure, descriptive Proforma, communicating assessment details to other professionals,etc.
- Infants at-risk general readiness, reciprocal actions, socio-communicative signals, early comprehension, early production, prevention of rhythm & voice disorders, etc.
- Language and communication intervention - philosophy in intervention, nature of disorders and different method of classification of children, theoretical bases of intervention - model, principles, content, context, procedures.
- Writing up a programme & follow-up, inter-professional communication

Paper V: Family and Community

No. of hrs.100

No. of marks:80

OBJECTIVES:

1. To understand family systems, dynamics, roles and relationships within family and community.
2. To assist families to identify either resources, priorities and concerns in relation to child's department
3. To acquire competency to evaluate services with families
4. To acquire ability to design process and strategies that support transition

Unit : I Parents and family

- Inference of a child with developmental delays on family.
- Inferencing factors, parental attitudes, parent child interactions, self-esteem, parental stress and depression, parent training programmes, parent to parent support programmes.

Unit II Family system

- Family functioning, family support, family resources, Family strengths,
- family needs and family coping and adaptive mechanism.

Unit III: Community

- Role of community in the field of Community culture, values and attitudes.
- Community awareness programs, Linkages of EI to other community program.
- Working in collaboration with other professionals and agencies, inter agencies and referral in larger community.

Unit III: Organizing early intervention services

- Service delivery models/settings, functions of team, Developing tool, Manual, Guide to be administered by the parent.

Unit IV Organization and development

- Organization and development of program in the community.
- Establishing linkages with pre-school based on development and learning experiences and teaching strategy.

INTERNSHIP DETAILS

:nil

PROGRAMME CONTENT AND CREDITS:

PAPER	NAME OF PAPER	UNIVERSITY MARK	INTERNAL MARK	TOTAL
Theory paper-I	Neurobiology	80	20	100
Theory paper-II	Child development and learning	80	20	100
Theory paper III	Assessment, intervention and evaluation	80	20	100
Theory paper IV	Therapeutics	80	20	100
Theory paper V	Family and community.	80	20	100
Practical-I	Case history and development assessment.	100	50	150
Practical-II	Individualized Early Intervention programming (IEIP)	100	50	150
Practical- III	Therapeutic assessment and intervention and Evaluation	100	50	150
Practical-IV	Individualized family programme	100	50	150
Total		800	300	1100

ATTENDANCE REQUIRED:

- ❖ Eighty percent 80% attendance is essential to be eligible for appearing for the examination.
- ❖ Hundred percent (100%) of the practical work and assignments should be completed
- ❖ Certified by the respective staff prior to the final examination. If due to illness the student is Unable to complete the target, production of medical certificate can be considered.
- ❖ However, the Final decision of allowing for examination will be taken by the competent authority.

QUALIFICATION CRITERIA:

- ❖ Theory for 80 marks 50% of this will be considered as pass mark.
- ❖ Practical each for 150 marks 50% of this will be considered as pass mark.
- ❖ 20 marks for internal assessment.

EVALUATION PATTERN:

- ❖ Internal marks.
- ❖ Theory marks
- ❖ Practical marks
- ❖ viva

SCOPE:

The professionals have a scope of working in:

Paediatric units of hospitals, paediatric clinics, child guidance clinics at risk follow up clinics, Child development centres, rural primary health centres in district health centres.

Comprehensive rehabilitation centres, service centres for visually handicapped, hearing Handicapped, mentally retarded, cerebral palsy and physically handicapped Coordinators, In charge of early intervention centres, pre-school and nursery programs.