



# Cognitive Rehabilitation

## 19 – 21 March 2020

### Introduction

This course aims to equip occupational therapists with the knowledge and skills required to assess the impact of cognitive impairment on everyday life. It will include: An overview of contemporary issues in assessment, a review of assessments used in practice and introduction to an ecologically valid approach to assessment and intervention. Participants will have opportunities to practice observing the impact of cognitive disorders on everyday life, set occupational performance goals and plan evidence-based, ecologically valid intervention. Opportunities will be provided for participants to tailor the contents to their practice domains.

### Course Objectives

- Define cognition and differentiate between cognition, functional cognition and applied cognition.
- Critically appraise cognitive assessments used by occupational therapists.
- Describe elements of an information processing model of applied cognition.
- Observe task performances and identify major issues with 'applied' cognition.
- Interpret and report relevant findings from assessments.
- Establish and prioritize therapy goals.
- Use best practice guidelines and models of intervention to structure a therapy plan.
- Measure the outcome of therapy.

### Course Outline

- Cognition and occupational therapy
- Task analysis as a basis for assessment
- Disorders of attention and perception (Perceive)
- Disorders of learning and memory (Recall)
- Disorders of higher cognition and insight (Plan)
- Disorders of initiation and follow through (Perform)
- Contemporary issues in intervention
- Principles of Intervention
- Systematic use of cues and prompts to enhance cognitive strategy application

Participants are invited to bring case histories to the course to facilitate application of the content to their workplaces. Further instructions will be provided.

### Course Details

Date	: 19 – 21 March 2020
Duration	: 3 days
Time	: 9.00 am – 5.00 pm
Venue	: <b>Therapy Skills Training Lab Academia Level 1 20 College Road, S (169856)</b>
Fee	: <b>S\$930 (SingHealth Staff/ SAOT Member) S\$1030 (Regular)</b> <i>(inclusive of 7% GST)</i>  With <b>VCF Funding*</b> : <b>S\$721</b> (Singaporean/PR) <b>S\$927</b> (Work Permit / Employment Pass / S Pass holders)

*\*For NCSS member VWOs and MSF-funded SSAs only.  
**Should PGAHI's reimbursement with NCSS be unsuccessful, the balance of course fees will be billed to the participant's organisation.***

### Target Audience

Occupational Therapists working in the following areas: stroke, traumatic brain injury, Parkinson's disease, multiple sclerosis, dementia or other conditions that impact on cognition (eg. chronic pain, prolonged low vision, mental health disorders, intellectual disabilities or the consequences of chemotherapy following cancer).

### Teaching Faculty

**Dr. Judy Ranka** is the Director of the Occupational Performance Network in Sydney. Through this Network, she teaches graduate and undergraduate occupational therapy students at several universities, provides and teaches local and international professional development courses primarily in the areas of cognitive rehabilitation, management of upper limb disorders and prescription and fabrication of upper limb orthotics for clients with disorders of neurological origin. She consults to brain injury services, participates in the development of international standards for upper limb orthotics and engages in and sponsors research. Dr. Ranka is co-author of the Occupational Performance Model (Australia), The Perceive, Recall, Plan & Perform System of Task Analysis and the Upper Limb Performance Assessment.

### Registration

Miss Joyce Lee  
Email: [joyce.lee.g.l@sgh.com.sg](mailto:joyce.lee.g.l@sgh.com.sg)





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## Registration Slip

# Cognitive Rehabilitation 19 – 21 March 2020

Submit your registration form to **Joyce Lee** at [joyce.lee.g.l@sgh.com.sg](mailto:joyce.lee.g.l@sgh.com.sg) by **28 February 2020**

The information provided for course registration is true and accurate to the best of my knowledge. Submission of any false information will render my application void with no refund of registration fee. Submission of my professional certification or qualifications for auditing purpose may be required.

By registering for the course, you agree to the [terms & conditions](#) of PGAHI.

Quick links: [FAQs](#), [PGAHI Programmes](#), [Training Calendar and Directory](#)

PARTICIPANT'S PARTICULARS	FEE
Name <i>(to be reflected on cert)</i> :	<b>S\$930</b> (SingHealth Staff/ SAOT Member) <b>S\$1,030</b> (Regular)  With <b>VCF Funding*</b> : <b>S\$721</b> (Singaporean/PR) <b>S\$927</b> (Work Permit / Employment Pass / S Pass holders)  <i>(inclusive of 7% GST)</i>
Contact no.: _____ Employee No.: _____	
Email: _____	
Profession: <input type="checkbox"/> AHP <i>(please indicate)</i> : _____ <input type="checkbox"/> Doctor <input type="checkbox"/> Nurse <input type="checkbox"/> Others: _____	
Department: _____	
Organisation: _____	
SAOT Membership no. <i>(if applicable)</i> : _____	

Any cancellation or replacement must be conveyed to PGAHI in writing. A cancellation fee of 50% of course fee will be charged if the cancellation is made before. **28 February 2020** There will be no refund of course fee for cancellation on or after **28 February 2020**. PGAHI reserves the right to cancel the course and fully refund the amount of registration fee paid to the participants should unforeseen circumstances necessitate it.

For **cheque payment**, please issue a **crossed cheque** payable to “**Singapore General Hospital Pte Ltd**” and mail the cheque attention to **Joyce Lee, SGH-PGAHI, 20 College Road, Academia, Level 2, Singapore 169856**.

For **invoice to organisation**, please complete the below billing details:

BILLING DETAILS
Bill to: _____
Billing address: _____
Attention invoice to <i>(name &amp; department)</i> : _____
Email of addressee: _____
Contact no. of addressee: _____

I consent to Singapore General Hospital and its related corporations (collectively ‘SingHealth’), their agents and SingHealth’s authorised service providers collecting, using, disclosing and/or processing my personal data, in order to send me marketing materials, etc.

I confirm and agree that my consents granted herein do not supersede or replace any other consents which I may have previously provided to SingHealth in respect of my personal data, and are additional to any rights which SingHealth may have at law to collect, use or disclose my personal data.

By providing the information set out in this form and submitting the same to you, I confirm that I have read, understood and consent to the SingHealth Data Protection Policy, a copy of which is available at <http://www.singhealth.com.sg/pdpa>. Hard copies are also available on request.