MISSION
The School of Rehabilitation Science aims to provide exemplary educational programs for students in occupational therapy, physiotherapy, rehabilitation science and health management. The School will contribute to the advancement of health care in general and rehabilitation science in particular through excellence in collaborative research and service initiatives.

VISION
The School of Rehabilitation Science aims to provide outstanding leadership in rehabilitation science at the national and international levels through continued expansion of innovation in education and research as well as increased commitment to service partnerships with clients and rehabilitation providers.

GOALS
- Excellence in education through the development, implementation, promotion and evaluation of: problem-based, self-directed life-long learning that is interdisciplinary and based on evidence.
- Research/scholarly activity in clinical and educational research, recognizing that there is a need to increase the research skills and productivity of faculty as well as consolidate the major research directions of the school.
- Service through the support of ongoing efforts of faculty and staff to serve the university, local community and provincial and national communities.
CONTENTS

4 Introduction: Patty Solomon, Associate Dean and Director, Rehabilitation Science
6 Physiotherapy Program
8 Occupational Therapy Program
10 Rehabilitation Science Program
12 Master of Health Management Program
14 Ensuring Optimal Aging for Canadians
16 Transforming School-Based Occupational Therapy Service
18 Advancing the Profession of OT and PT
20 International Influence of the SRS
22 SRS Alumni
24 SRS Faculty
26 Clinical Placement and Fieldwork Facilities
30 Clinical Faculty and Professional Associates
31 SRS Making Headlines
32 Faculty Publications

Produced and Designed by
Stephanie Nicoll, Taylor Boer,
Nadia DiTraglia - Media Production Services

Writers
Lesley Young, Stephanie Nicoll, Taylor Boer

Photography
Eric Bosch, Mike Lalich

Special thank you to all SRS Faculty, Staff, Students, Alumni and Community Members who contributed to this report and helped make the publication possible.
The annual report of the School of Rehabilitation Science (SRS) provides an opportunity to share the accomplishments and successes of the school with faculty, colleagues, alumni and community supporters. This report highlights the SRS’s achievements from July 2014 – December 2015. Much of what is highlighted in the report was achieved through the support of our community, who are acknowledged through the report. The partnerships and ties that the SRS has with community, both internal and external to McMaster, are an integral part of our education and research endeavours.

Over the past 18 months, the School has experienced change as we have welcomed new faces and said goodbye to some very familiar ones. The SRS welcomed Dr. Briano DiRezze and Dr. Wenonah Campbell to the SRS faculty in 2015. We also celebrated the retirement of Dr. Laurie Wishart, who served as the Physiotherapy Program Assistant Dean from 2003 – 2008 and has left a lasting impact. In addition, Dr. Joy MacDermid, a faculty member in the School since 2001, and Rehabilitation Science Program Assistant Dean from 2010 to 2014, has assumed an endowed Chair at Western University. While Dr. MacDermid continues to be involved in the School we will miss her ongoing presence. Thank you to Laurie and Joy for their outstanding contributions throughout their time with the SRS.

The partnerships and ties that the SRS has with community, both internal and external to McMaster, are an integral part of our education and research endeavours.

The School held a number of prominent celebrations over the last year. We were honored to host Dr. Sandra Olney at the 15th annual Helen Saarinen lectureship in September 2014. Dr. Olney gave a compelling talk about ‘Remarkable Rehabilitation and the Roles of Leadership’. In October 2015, we hosted our second Distinguished Alumni Awards dinner, honouring distinguished alumni across our educational programs. A great evening was had by all in celebration of the accomplishments of the three noteworthy individuals; further details on these extraordinary alumni are provided later in the report.

Our educational programs have experienced many achievements over the last year. The Physiotherapy Program received full accreditation under the leadership of Assistant Dean, Dr. Vanina Dal Bello-Haas. The review team highlighted the many strengths and innovations of the program and the accomplishments of the students and faculty. The Occupational Therapy Program launched “Steps and Pillars” a new conceptual framework for the Program and is preparing for accreditation in 2016. The Masters of Health Management Program celebrated its third graduating class in 2015 and our thesis based programs in Rehabilitation Science continue to attract many excellent students nationally and internationally.

The faculty within the SRS have continued to shine over the last 18 months. A study conducted by Joy MacDermid and published in Physiotherapy Canada, found that SRS faculty consistently ranked highest in Canada for faculty productivity and research impact. The data provides objective evidence of our research excellence and the impact of the School within the scientific community. This is compounded by the many research accomplishments over the last 18 months including projects funded by the Labarge Optimal Aging Initiative and McMaster President’s Forward with Integrity project. Further details of our research successes are described throughout the report.

I invite you to continue reading this annual report which provides additional details on the activities and accomplishments of the School of Rehabilitation Science.

Patty Solomon
Associate Dean & Director
School of Rehabilitation Science
in education and research
Physiotherapy

Creating Autonomous Health Professionals
This 25-month, full-time Physiotherapy (PT) program introduces students to the world of Physiotherapy, where they gain the knowledge, attitudes and skills to become autonomous health professionals. The program is comprised of six Units of study and a variety of academic and clinical experiences, including five 6-week, full-time clinical placements, and prepares students to work in a variety of roles and practice environments.

Continuous Recognition
In the past year and a half, the PT program graduated 129 students. As of December 2015, 137 students were enrolled in the program. Student excellence was recognized by the PT Program through various admissions, in-course, and graduation awards. The PT program also recognized our alumni who continue to excel in the field through the Distinguished Rehabilitation Science Alumni Award in Physiotherapy, and our alumni and staff who contribute tirelessly to the program in various ways through the contributions to the school, Preceptor of the Year and Unsung Hero awards.

Successful Accreditation
The PT program has many reasons to celebrate. On April 30, 2015, the McMaster Physiotherapy Program was deemed to have successfully met the standards of Physiotherapy Education Accreditation Canada (PEAC), and was awarded full accreditation for six years. The accreditation report outlined the many strengths of the Physiotherapy Program, including a very engaged and supportive clinical community, as well as an engaged student body and the outstanding accomplishments of the faculty. The School of Rehabilitation Science is proud of this recognition and would like to thank Vanina Dal Bello-Haas, Assistant Dean (Physiotherapy) for her leadership and all of the individuals involved in the achievement of this important milestone.

Innovative Curriculum Renewal
Now that full accreditation has been awarded, the Program is turning its full attention to curriculum renewal. An extensive internal and external environmental scan was undertaken to identify changes in education, at McMaster, in the physiotherapy profession, in health care, and in society locally and globally as a basis for our planning, and the program continues to consult with its stakeholders regarding the proposed changes. Through curriculum renewal, the McMaster Program will be at the forefront of physiotherapy education, educating students not only for today’s practice, but preparing students for the future of physiotherapy and health care.
NICK PERSADIE
Physiotherapy Student, Class of 2016
Self-directed and problem-based learning is undoubtedly a challenging method of learning, but I truly believe this makes the program unique and enhances the overall learning process for the students. This style of learning enables us as future physiotherapists to develop the skills required to rely on evidence-based practice, which is a necessary component for providing optimal care to our future patients and clients.

VANINA Dal BELLO-HAAS
Assistant Dean, Physiotherapy Program
The relationship that our program has with the community is critical to our success and beneficial to everyone involved. We engage with our partners and keep them apprised of changes, and in turn our community partners help shape what we’re all about as a program and the type of graduate that we want to produce.

GILLIAN MANSON
Practicum Clinical Instructor and Problem Based Tutorial Tutor
I have always felt that assisting in the education of physiotherapy students is an important part of my role as a professional. I think students provide clinicians with an opportunity to challenge their clinical knowledge and practice. The McMaster approach to learning provides students with a strong foundation for lifelong learning and confidence in looking for solutions. Placements are often intense and fast paced, but provide an excellent opportunity for students to learn a variety of skills. Students are immersed in new learning in a supportive, multi-disciplinary environment.

STEPHEN PATTON
Problem Based Tutorial Tutor
I believe in giving back to the profession. Working with the students is my way of promoting ongoing success of the profession by sharing my experience. It is also a great way to stay current as the students bring the most up-to-date information to their tutorials to discuss. Practicing clinicians have so much to offer the students in PBT. I have found all the students to be very grateful of my contribution to their learning. Working with the students and the faculty is a great way to support the development of the future of physiotherapy.
Occupational Therapy

Champions of innovation, leadership and scholarship, promoting health and participation through occupation

The Occupational Therapy (OT) Program has been very productive over the span of this report. With 125 student occupational therapists engaged in learning in our two year, full time program, faculty and community-based educators are continually striving for excellence in their work to see the program’s vision brought to life.

“Steps and Pillars”: Refining Guiding Conceptual Frameworks

The OT program has implemented a new educational and professional conceptual framework. Although many of the framework components are not new to the OT program, it has integrated all the aspects into a single “Steps and Pillars model” which culminates in the outcome of competent entry-level Occupational Therapists. The pillars represent the main educational models, theories and concepts that are drawn upon in the courses – they represent how the program is delivered. The steps represent the main professional theories, models and concepts that are addressed in the program – these represent what is taught.

University-based and practica courses offered in the OT program draw on many of the principles and approaches of the pillars simultaneously. Lori Letts, Assistant Dean, Lorie Shimmell, Director of Clinical Education and Gioia DiVincenzo, Clinical Education Assistant visited 15 of our clinical partner sites from January – April, 2015 to share and discuss the framework and its application to fieldwork.

Logic Model Development

Throughout much of 2015, a working group of faculty, students and community members reviewed and made major modifications to the Program Logic Model. The logic model work resulted in a new vision statement, and clear articulation of the key activities that make up the program (admission, curriculum academic review, and outcome evaluation), and describes the changes that are expected to occur as a result. An evaluation plan based on the Program Logic Model is now being implemented.

A new legacy for McMaster Occupational Therapy Research

In partnership with the Canadian Occupational Therapy Foundation (COTF), the McMaster University Legacy Fund was initiated as a way to acknowledge the legacy of faculty members in Occupational Therapy. As faculty members retire, they encourage friends, family and colleagues wishing to make a gift donation to contribute to this fund. It represents a way for their legacy to continue after their retirement. The intent is that each cycle of the funding will be in honour of one or more retirees, and the research grants will be designed to specifically address the interests of that person. The inaugural McMaster University Legacy Fund was launched in February 2015, in honour of Penny Salvatori and Mary Edwards, both of whom retired in 2008. The focus of this award was on clinical education of student occupational therapists. The grant was awarded to Prof. Susanne Murphy and Dr. Catherine Donnelly, from Queen’s University, for a project entitled: Using Online Learning Communities to Foster Integration of Learning in Fieldwork Education.

Current Student Ratio

<table>
<thead>
<tr>
<th>Gender</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>21%</td>
</tr>
<tr>
<td>Female</td>
<td>79%</td>
</tr>
</tbody>
</table>

Number of Tutors (July 2014 - Dec 2015)

108

Number of Clinical Instructors (July 2014 - Dec 2015)

318

Number of Research Evidence Based Projects

27

Number of students participating in Northern Studies Stream

40

Number of Clinical Placements Completed

Four hundred
LORI LETTS
Assistant Dean, Occupational Therapy Program
One of the strengths of the steps and pillars model is that it has helped us to be more explicit about not just problem based learning and self-directed learning, but also experiential learning, interprofessional education, and inquiry based learning as important pillars that make the program as a whole a more comprehensive approach to supporting the students’ learning.

JENNIFER MICHETTI
Problem Based Tutorial Tutor
I decided to become a tutor in the OT program because I wanted to be a part of facilitating learning experiences for students, because you can see the learning happen on their faces and can see them making connections between classroom concepts and reality based scenarios.

RACHEL CONWAY
Occupational Therapy Student, Class of 2016
When I graduate from the OT program, I will graduate as a generalist; therefore I know I will face many situations where I don’t know the best or most appropriate answer for a specific client or population. The skills I developed through self-directed and problem-based learning will enable me to navigate through these situations.

KIM HEWITT
Clinical Practicum Preceptor
Student OTs from McMaster come ready to integrate with teams, handle themselves with a high level of professionalism and handle feedback with poise and reflection. I attribute these qualities to the value the school puts on embedding the development of these skills within tutorials and throughout the program.
Rehabilitation Science

Excellence in Academics and Research

Rehabilitation Science (RS) Graduate Programs continue to offer two degrees, the thesis-based Doctor of Philosophy (PhD) and the thesis-based or course-based Master of Science (MSc). The MSc course-based option is delivered primarily in an online format, although the Orthopaedic Manipulative-Musculoskeletal Physical Therapy (OMPT) field of specialization is a hybrid of distance and face-to-face learning. Research Rounds and the RS Skills Series continue to be key milestones for both Programs.

In the timeframe of this report, degrees were conferred to a total of forty students: 11 completed the PhD(RS), 19 completed the MSc(RS) course-based option, and 10 completed the MSc(RS) thesis-based option. This year, the RS Graduate Programs awarded Dr. Adalberto Loyola-Sanchez with the inaugural Excellence in Rehabilitation Science Research Award. This recognizes the graduating PhD student who embodies the doctoral-level guiding principles of scholarship, impact and emerging leadership in the field of rehabilitation science research while maintaining an excellent GPA and completing the degree milestones in a timely manner.

Leadership

Whereas the program offerings have undergone minor changes, the leadership has changed substantially in the last year and a half. Dr. Joy MacDermid completed her term as the Assistant Dean (RS) in December 2014, culminating in an extremely positive Institutional Quality Assessment Process review. Dr. MacDermid relocated July 1, 2015 to become the inaugural James Roth Chair in Musculoskeletal Measurement and Knowledge Translation at the Hand and Upper Limb Centre, St Joseph’s Health Centre, in London, ON. We wish Dr. MacDermid continued success, acknowledge her contributions to the tremendous growth of the RS Graduate Program and appreciate her ongoing support. Dr. Julie Richardson contributed important leadership as acting Assistant Dean (RS) from January to June 2015 and then Dr. Norma MacIntyre assumed the role. The RS Graduate Programs continue to benefit from the ongoing contributions of the RS faculty and beyond.

Program Development

Activities this year continue to focus on strategies to attract high quality applicants. The MSc(RS) OMPT field of study is undergoing review for accreditation by the International Federation of Orthopaedic Manipulative Physical Therapists thanks to the leadership of Ms. Anita Gross with the support of the RS Graduate Program. Curricula for clinician-scientist pathways (MD/PhD(RS), OT/PhD(RS), and PT/PhD(RS)) are under development. Also, PhD comprehensive examination criteria and processes are being reviewed at the departmental and FHS levels.

Students Honoured

RS thesis-based students continue to receive recognition through institutional, organizational, provincial and national awards and scholarships, including the CIHR Doctoral Research Award, Vanier Scholarship and SSHRC Graduate Scholarship.
JOYCE TRYSSENAAR
Associate Professor, Coordinator, MSc Course-Based Online program
One of the benefits of the RS course-based program is that it is so interprofessional and interdisciplinary. The fact that there can be a physiotherapist, an occupational therapist, an athletic therapist, a prosthetist/orthotist and a chiropractor, for example, all in one learning group means that they learn a significant amount of what’s happening in other disciplines.

PAUL STRATFORD
Professor
I’ve seen the RS program grow substantially since its inception; this growth has been due to the outstanding leadership that the program has had.

NORMA MACINTYRE
Assistant Dean, Rehabilitation Science Graduate Programs
There are a variety of options in the RS graduate program that allow tailoring to align with the academic needs of each learner. There is flexibility to mix or switch between options if learning goals or career plans change. One might say that the RS Graduate Program is like a ‘one-stop shop’, distance education advances scientific knowledge, clinical reasoning, and applied clinical research skills, the on-site thesis-based options provide intensive clinically-relevant research training and a hybrid learning model is possible. The variety of options, and the diversity of learners attracted, adds a richness to this environment that is truly unique.

ANDREA CROSS
PhD Student
My favourite part (of the program) is the interdisciplinary nature of the program. Situated within the Faculty of Health Sciences, I have had the opportunity to work and collaborate with people from a variety of fields. I believe that both research and teaching require team efforts and by working together we can learn from one another and make a stronger impact.

TIM ROGERS
OMPT Student
The OMPT specialization in the McMaster MSc Course-based Rehabilitation Science program has allowed me to combine my strong background in Orthopaedics and Manual Therapy with achieving a Master of Science degree to become a clinical researcher. The small group instruction by leaders in the orthopaedic field in Canada has provided me with leading edge knowledge and clinical skills.

contributions that lead to success
Providing, instilling and promoting continuous learning among health professionals

The Master of Health Management (MHM) program is a partnership between the DeGroote School of Business (DSB) and the School of Rehabilitation Science (SRS) at McMaster University. The MHM program is targeted to regulated healthcare professionals in Canada or internationally, and it prepares them to meet the demands of a career in health management. This part-time distance education program is delivered online, with two short, intensive, onsite residency periods. In September 2014, the program welcomed 48 new students to start their studies in the program. As of August 2015, there were another 48 students admitted to the MHM program. MHM is maintaining steady state, which is a testament to the ability of this innovative program to meet the needs of professionals.

Experts in academia, industry and government help students gain the skills necessary to solve complex healthcare problems

Over the past year, MHM had two successful residency periods, in October 2014 and May 2015. Since the program is offered online, these in-person events are vital in building community among students, alumni, staff and faculty; developing competencies; and disseminating program information. In October, students had opportunities to build relationships, understand the McMaster library system, and hone their oral presentation skills. In May, the residency featured four leaders from a variety of healthcare organizations. These individuals led panel presentations on ethical leadership, which gave the MHM students new and real-world perspectives on topics that they were learning in class.

Celebrating our students’ accomplishments

The MHM Program is proud of its students’ accomplishments, and recognizes their excellence through the presentation of multiple awards at convocation. This year, the program presented the Award of Excellence, the Scholarly Paper Award, and the Community Contribution Award to deserving individuals. The program also acknowledges the fact that many students and graduates received the Certified Health Executive (CHE) designation. This is made possible due to an alliance between the Master of Health Management program and the Canadian College of Health Leaders. This year, several MHM students were awarded Faculty of Health Sciences Research Plenary Outstanding Achievement Awards. Others were successful in publishing, presenting, and receiving funding for initiatives initially developed through assignments in their MHM courses.

We value you!

With the program’s third cohort graduated, MHM alumni has grown to 76 individuals, with 36 brand new alumni graduating in June 2015. Our alumni have graciously volunteered on the admissions committee, welcomed newcomers during the residency periods and provided profiles for our social media sites, LinkedIn and Facebook. We value their contributions to the program. One year after convocation, a survey is sent out to MHM graduates so that they can provide their feedback on the program. Ninety-four percent of the past graduating class rated their overall level of satisfaction with the MHM degree program as “satisfied” or “very satisfied”. One graduate stated, “I wouldn’t be in the position I have today had it not been for the MHM program.” This positive program evaluation reassures us that the program McMaster offers is extremely relevant to and desired by today’s healthcare professionals and their employers.
The concepts learned in the program are directly applicable to the workplace. The program delivers on providing students with the confidence and foundation of knowledge required to migrate up the formal leadership ladder. My favourite part of the program is having the opportunity to engage with such a diverse group of students from different professions and geographical locations. This aspect of the program truly broadens the learning experience to within and beyond one’s profession and location of practice.
Researchers at the School of Rehabilitation Sciences (SRS) are making huge strides in finding ways to maximize disability-free lifespan as we age. A dedication to community-based research, self-management and evidence-based knowledge guide the following exciting projects, some funded by the Labarge Optimal Aging Initiative. But it is also the passion of SRS faculty that drive forth innovation in researching health outcomes for the inevitable, mobility-threatening condition we all face sooner or later: aging.
Finding the right exercise prescription for arthritis

Plenty of evidence confirms exercise reduces joint pain and improves mobility in people with arthritis. However, there is also evidence that too much exercise can damage joints. “Right now, there’s a real lack of data for the ideal type of exercise for people with arthritis. The trick is finding the sweet spot,” explains McMaster physiotherapist, professor and researcher Monica Maly. With that in mind, she is conducting a 12-week exercise intervention with arthritis sufferers, as well as pioneering research using a combination of MRI technology and bio-mechanical analyses to ascertain what kind of exercise is well-tolerated by cartilage. The long-term hope? That the research will result in specific guidelines that all of Canada — indeed, the world — will promote to ensure people with arthritis exercise safely.

Managing the transition from hospital to home

Often older adults with multiple chronic conditions are not ready to be on their own at home after being released from hospital. “They still have rehabilitation needs,” explains Vanina Dal Bello-Haas, associate professor. That is why she and co-researcher Sharon Kaasalainen are leading up a study of a one-of-a-kind Adult Day Service model in Ontario, set in Shalom Village. They are researching the impact of Goldies2Home, a community-based, slow-stream rehabilitation program, following participants over six months to see how the program affects them in the short and longer-term. “How we better manage that transition from hospital to home has major physical, psychological and emotional impacts, as well as economic and societal benefits,” explains Dal Bello-Haas.

Removing barriers to post-stroke exercise

Exercise after stroke is critical for lowering the risk of recurrence, however post-stroke impairment can limit activity. SRS faculty and researchers Jocelyn Harris and Ada Tang (and colleague Marco Pang in Hong Kong) are leading the largest-ever study to examine types of preferred activities and activity barriers people with stroke experience. Preliminary findings are revelatory: “Environmental barriers, not person factors, are the greatest barrier to activity. We weren’t expecting that, and it means that interventions can be tailored to address this,” explains Harris.

Ada Tang is also working with SRS faculty member and researcher Julie Richardson on a major community-based project targeting individuals post-stroke called Fit For Function. The partnership between the YMCA of Hamilton/Burlington/Brantford, YMCA of Niagara, Hamilton Health Sciences, Niagara Health Systems and Brant Community Healthcare System, and McMaster University is reviewing the effect of a stroke exercise and wellness program in the community. “Our hope is that this innovative model will spread into other communities as a long-term sustainable program for the population,” says Tang.

Preventing functional decline before the onset of disability

In an ideal scenario, we address the earliest signs of disability using self-monitoring approaches to manage function and prevent or delay decline. ‘Preclinical disability’ — which is the subtle modifications we make such as slowing down as we step onto an escalator or leaning against the shower wall as we stand on one leg to maintain our balance — is central to the research project being undertaken at the Stonechurch Family Health Centre, being led by Julie Richardson, and Lori Letts, SRS faculty members and researchers.

“This is important because it is an easier stage for a physiotherapist or occupational therapist to intervene and restore a previous function level for the person,” explains Richardson. The self-management component of the project also uses technology to document assessments, monitor physical function through self-reporting and in delivery of recommended activities to mitigate pre-clinical disabilities, explains Letts. “We want to help prevent functional decline for as long as possible for everyone, and the technology allows people to engage in self-management virtually,” adds Letts.
When McMaster School of Rehabilitation Science Professor Cheryl Missiuna set out to find a way to support children with Development Coordination Disorder (DCD) in schools, she did not anticipate how her teams’ efforts would snowball into a practice-changing research and service delivery model driven by the support of an extensive network of community partners.

“Our goal was to shift the focus away from intensive one-on-one treatment with long wait times,” says Missiuna, who holds the John and Margaret Lillie Chair in Childhood Disability Research. “Instead, we put the focus on changing the environment so that educators, school staff and parents can better support children with coordination difficulties that impede their participation, learning and development.”

The nearly six percent of school-aged children who have DCD find everyday tasks like writing, using scissors, dressing or riding a bike to be very challenging, says Missiuna, who is also a scientist with CanChild, a research centre housed in the SRS that focuses on generating and translating knowledge relevant to children with disabilities and their families. DCD, a chronic health condition

Transforming school-based occupational therapy service

A team of McMaster investigators is demonstrating how participatory action research can change practice
that persists into adulthood, can result in secondary health risks such as depression and obesity if children do not receive adequate support. The innovative service delivery model, called Partnering for Change (P4C), eliminates treatment wait times, provides a more holistic intervention, and facilitates earlier access to services.

In the P4C model, Occupational Therapists (OTs) deliver services and collaborate with educators in context, which means that they work in all the spaces and places in a school where children learn and play. A unique aspect of this model is its focus on capacity building and knowledge translation: OTs problem solve with educators and model techniques for supporting children. In addition, they connect with parents to share strategies that will help at home. Three major studies completed over eight years have shown the novel research and service delivery approach to be hugely successful.

In the most recent study involving forty schools and three school boards, not only were wait lists eliminated in P4C schools, 8172 individual accommodation suggestions were shared with educators and families, while 806 children with special needs — no longer limited to DCD students — have been given equal access to services. Educators reported an increase in knowledge and skills, while parents indicated they were better equipped to adapt tasks and the environment for their children. “The participating OTs report a strong sense of professional growth, recognizing the contribution they can make to schools beyond serving individual children,” adds Missiuna.

This is attributable to the community-based support received early on, points out Dr. Wenonah Campbell, SRS Assistant Professor and one of P4C’s many McMaster co-investigators, which also includes Nancy Pollock and Debra Stewart. “All of the stakeholders, local health agencies, [government] ministries, school boards, identified this as an issue of importance. It’s an incredible example of participatory action research,” she explains.

The innovative service delivery model, called Partnering for Change (P4C), eliminates treatment wait times, provides a more holistic intervention, and facilitates earlier access to services.

The project’s success hinged on this collaboration between researchers and knowledge users because switching from direct one-on-one care to a classroom-based service model required a paradigm shift in the way OTs deliver occupational therapy services. “Our health care partners had to change their own reporting systems internally from a fee-for-service to a workload approach to allow this model to unfold,” explains Campbell. “This is hugely transformative as to how rehabilitation services are delivered in the classroom.” P4C doesn’t just represent a groundbreaking shift in how OT is practiced, she adds, but ensures that the services delivered reach far more children and are, therefore, more equitable.

P4C is being recognized as a transformational model by other researchers in the broader community who are seeking examples of how to use participatory research approaches, knowledge translation, and implementation science. “Researching how to preserve the core of the intervention while implementing it in the community and sustaining its effectiveness is quite novel,” points out Campbell. There is optimism that P4C could inform the work of local and provincial groups who are currently developing services for the Ontario Special Needs Strategy. “The real success story here,” adds Missiuna, bringing us back to the heart of the matter, “is that so many partners could agree to put the children first in order to wrap services around them to enhance function and participation.”

Learn more about P4C at www.partneringforchange.com

www.srs-mcmaster.ca | 17
Advancing the profession of OT and PT

SRS’s increasing array of diverse role-emerging placements is preparing students for new, vital rehabilitation frontiers

One of Jaclyn Falotico’s most empowering student experiences during her Master of Science (MSc) Physiotherapy (PT) program was a unique 2014 placement at The Dr. Bob Kemp Centre for Hospice Palliative Care. “It was unusual because there isn’t typically funding for physiotherapy in a palliative care setting. Organizations would rather pay for nursing staff or what is seen as more essential services,” she says. Over six weeks’ time at Bob Kemp, Falotico and her clinical instructor observed and assessed clients, and ran a group-based, 15- to 20-minute exercise program for people with chronic and terminal illness.

“Our post-assessments showed a decrease in pain symptoms, and positive improvements in Timed Up and Go (TUG) scores. It also showed us there is real need for PTs in settings like these.” Moreover, Falotico points out how much experience she gained taking charge, developing a program from scratch and conducting research, which she presented at this year’s Canadian Physiotherapy Association Congress in Halifax. “It was a lot of work but it showed me how to be a physiotherapist in my own right. It opened up so many doors for me,” she adds.

Giving students hands-on experience in innovative settings is not the only benefit of the School of Rehabilitation Science’s expanding array of role-emerging placements. Sarah Wojkowski, Assistant Professor and Director of Clinical Education for the MSc PT Program, says, “We’ve observed that often times what students experience in clinical placements can shape the direction of their post-graduate work.”

Obviously, supporting PT and Occupational Therapy (OT) student paths into non-traditional opportunities has the potential to expand both professions. But that’s not all—the efforts of Wojkowski and her faculty counterpart in the OT program, Lorie Shimmell, to develop increasing role-emerging placements also improves community access to both professions. “We’re always looking for areas where individuals might have barriers to accessing our services so we can address unmet need,” adds Wojkowski.

In the case of OT, role-emerging placements also pave the way for future paid positions by allowing organizations to test the benefits, explains Shimmell. “As a profession, we are trying to articulate and clarify our role to the general public. By operating with a team of staff and working with clients on individual issues in a placement, everyone can see what needs to be done.”

A terrific example of this occurred when Shimmell arranged for SRS students to participate in a country-wide placement pilot project with the Canadian Working Group on HIV and Rehabilitation. Participating students identified gaps, and assisted with modifying environments and activities so clients with HIV were able to safely and functionally return to engagement in their occupations, personal care and leisure. “What we found was that OT is absolutely a piece of the puzzle with these clients,” says Shimmell. The student occupational therapists and Shimmell are also preparing a journal manuscript and presented their findings at the 2015 Canadian Association of Occupational Therapists Conference in Winnipeg.

“While not every role-emerging placement will carve out future paying roles for rehabilitation science students, there’s still the benefit of showing students how important it is to be involved and give back their knowledge and skill to the community,” adds Shimmell. “Plus, the student OTs are working with other health-care professionals to build their capacity.”

This particular benefit is mutual: Brittany Nolan, a second year student in the MSc Occupational Therapy program, recently completed a role-emerging placement in which she developed a policy to make trails more accessible for the Hamilton Burlington Trails Council. “I worked with different health-care professionals who did not have the lens of OT, so I had to learn how to communicate with them. I gained a lot of interprofessional skills that will really benefit me down the road,” she adds.

The OT and PT programs’ commitment and relentless quest for role-emerging placements is a win-win for the SRS and the community. Not only do the role emerging placements facilitate learning while giving back knowledge and skill, they also benefit clients who might not otherwise enjoy the benefits associated with OT and PT.
The OT and PT programs’ commitment and relentless quest for role-emerging placements is a win-win for the SRS and the community. Not only do the role emerging placements facilitate learning while giving back knowledge and skill, they also benefit clients who might not otherwise enjoy the benefits associated with OT and PT.
International influence of the SRS

Global research and clinical placement opportunities allow the SRS to extend its reach worldwide and encourage education in varied, real-world contexts.

**Dr. BETO LOYOLA-SANCHEZ**
RS PhD Student, Class of 2015
**RS INTERNATIONAL STUDENT RESEARCH:** Completing my PhD work in an underserved rural Mayan community in Mexico was really rewarding. This experience opened my eyes to the importance of expanding the field of Rehabilitation to the community level. In addition, it helped me understand the strong relationship between poverty and disability and how essential is to consider the concept of functioning at the center of health services in socially marginalized communities. Involving the Rehabilitation Sciences with the Global Health Research movement is essential to accomplish social justice in relation to population health.

**KAYLA NG**
MSc(PT) Student, Class of 2015
**PHYSIOTHERAPY INTERNATIONAL PLACEMENT:** I completed my final clinical placement in the Physiotherapy program at the Mayo General Hospital in Ireland. There is a lot to learn and gain from a placement experience outside of Canada – global education, cultural diversity, acquiring unique clinical skills, developing a professional network. I had a great opportunity to understand the west coast lifestyle in Ireland and meet patients who were farmers working in the bog, learn about the academic and professional physiotherapy system in Ireland, use different gait aids and equipment, and see some injuries from the beautiful and intense sport of Gaelic football. My international experience challenged me to work outside of my comfort zone and gave me a small taste of the Irish life!
BSHET WIDEMAN
MSc(OT) Student, Class of 2015
OCCUPATIONAL THERAPY
INTERNATIONAL PLACEMENT: Through my international experience, I gained a greater appreciation for the influence of culture, religion and spirituality on one’s beliefs around illness, disease and disability. Additionally, Bhutan’s Gross National Happiness offered a fresh and unique perspective on what is needed for true happiness.

RAMJIT GARCHA
MSc(OT) Student, Class of 2015
OCCUPATIONAL THERAPY
INTERNATIONAL PLACEMENT: The international experience taught me how to come up with creative solutions to problems, as I often did not have items that would be easily attainable in Canada. I also learned a lot about how rehabilitation is practiced in rural settings. Since I did not speak Tamil, I communicated a lot using non-verbal communication techniques and learned a lot about the Tamil culture.

CHUN YI LIM
RS PhD Student, Class of 2015
RS INTERNATIONAL STUDENT RESEARCH: My research involved cultural adaptation and validation of the Young Children’s Participation and Environment Measure (YC-PEM) in Singapore for children with and without developmental needs. The YC-PEM is originally developed from North America and this doctoral process offered me the opportunity to adapt a useful instrument to be used in Singapore.

MICHELLE KHO
Assistant Professor
WORLD PHYSICAL THERAPY CONGRESS: I led a focused symposium entitled, “Physiotherapy in the ICU: current evidence and practical applications” at the 2015 Congress of the World Confederation of Physical Therapy in Singapore. Together with colleagues Jennifer Zanni, PT, DScPT (Johns Hopkins University, USA), Bronwen Connolly, PT, PhD (Guy’s & St Thomas’ NHS Foundation Trust, UK), and Selina Parry, PT, PhD (The University of Melbourne, Australia), the team presented a comprehensive session on the rationale for PT, best evidence, use of outcome measures, and clinical decision-making with critically ill patients.

YUNWHA JEONG
RS PhD Student, Class of 2015
RS INTERNATIONAL STUDENT RESEARCH: The focus of my research was to develop and test the Korean version of a participation measure for Korean children with disabilities. Doing my research in the School of Rehabilitation Science at McMaster University was a great opportunity (1) to increase the awareness of importance of measuring participation of children with disabilities among Korean health care providers, and (2) to give them a chance to appropriately measure participation of children with disabilities using a cross-culturally and psychometrically sound Korean participation measure.

RAMJIT GARCHA
MSc(OT) Student, Class of 2015
OCCUPATIONAL THERAPY
INTERNATIONAL PLACEMENT: The international experience taught me how to come up with creative solutions to problems, as I often did not have items that would be easily attainable in Canada. I also learned a lot about how rehabilitation is practiced in rural settings. Since I did not speak Tamil, I communicated a lot using non-verbal communication techniques and learned a lot about the Tamil culture.
Alumni

The School of Rehabilitation Science (SRS), over its lifetime, has graduated 1000s of students from our four educational programs. The SRS has alumni represented around the globe and over the last 18 months has had the opportunity to reconnect with many to celebrate their accomplishments as representatives of the School.

In May 2015, the SRS hosted a Physiotherapy and Rehabilitation Science Soiree at the Canadian Physiotherapy Association conference in Halifax. The event brought together alumni from the PT and RS programs, along with current students and faculty members. The opportunity to connect with alumni from many generations of the PT and RS programs was a standout success.

In October 2015, the SRS had the honour of celebrating three Distinguished Alumni at the Distinguished Alumni awards reception and dinner. This year’s recipients were: (1) Derek Debassige, MSc(PT) Class of 2000, (2) Nadine Graham, BSc(PT) Class of 1992 and MSc(RS) Class of 2008, and (3) Nancy Rushford, MSc(OT) Class of 2003. The celebration included a dinner and an awards ceremony, where the School recognized the accomplishments of these well deserving alumni.
PT ALUMNI

Anik Sarkar
MSc(PT), Class of 2014

The Physiotherapy program at McMaster offered me a realistic way of learning and adapting to new knowledge and situations. Problem-based learning allowed for an environment that was team-focused, valued individual effort, and provided a realistic depiction of life after graduate school.

Sara Quiring
MSc(PT), Class of 2009

Through the innovative learning style of the McMaster physiotherapy program, the effective faculty, and my unique background, I was able to explore my strengths, weaknesses, and true passions on a daily basis.

Anastasia Newman
MSc(PT), Class of 2006

McMaster graduates stand out from the crowd – they don’t continually ask for the answers to questions, they simply research it themselves! This makes for independent, self-reliant and knowledgeable physiotherapists.

OT ALUMNI

Nicholas Morrison
MSc(OT), Class of 2013

McMaster’s problem-based and self-directed nature provided me with the skills I need for independent practice. I’ve frequently come across new conditions and traumas in my field and I’m now able to methodically research what assessment and treatment plans I need to find to provide my patients with the best standard of care.

Sarah Shallwani
MSc(OT), Class of 2012

The program helped me in achieving my career goals by allowing me to grow into a confident clinician. Clinical placements as well as classroom discussions have enabled me to clinically reason through challenging scenarios and defend my position when needed.

Lesley Stephenson
BHSc(OT), Class of 1983

Being self-directed enables new graduates (and practicing clinicians) to seek out information/create strategies to facilitate their own professional development over time. The program has the potential to create lifelong learners who not only grow individually as professionals, but also influence the growth of the profession.

RS ALUMNI

Saurabh Mehta
PhD (Rehabilitation Science), Class of 2012

The various aspects of program such as the focused and relevant coursework, productive comprehensive exam experience, and emphasis on high scientific productivity prepared me to be a successful academic researcher. The internal scholarship support at the SRS allowed me to travel to national and international conferences and share my work with fellow researchers as well as become familiar with new advances in rehabilitation science.

Samantha Lam-Bellissimo
MSc (Rehabilitation Science), Class of 2012

I feel that I am a better leader for having completed the MSc Course-based program in Rehabilitation Science. I mentor, encourage and champion evidence-based practice, cultural competency and inclusive decision making practices in my workplace team.

Deborah Kennedy
MSc (Clinical Health Sciences-Rehabilitation Science), Class of 2003

The skills I learned through the problem-based approach to learning have served me well in my various management positions. In addition, I have been able to share the incredible mentoring I received with some of my staff so that they too have returned to obtain graduate degrees. The program also enabled me to establish a network of colleagues for research collaborations.

MHM ALUMNI

Richard Ferron
MHM, Class of 2015

The aspect of the MHM program that I appreciated most was the opportunity to collaborate with a talented group of professionals from various health care settings and disciplines. This provided not only opportunities for networking, but for shared perspectives and a broader understanding of the health care system.

Jennifer MacKendrick-Webber
MHM, Class of 2014

The sense of community and collaboration amongst the class and faculty exceeded what I thought possible online. The learning from the varied professions and experiences across health sectors, public and private, was invaluable.

Stefanie Ralph
MHM, Class of 2012

The program has helped me look at issues and opportunities from a broader systems perspective. Classmates from across the country had different viewpoints and opinions that made our online discussions richer.
Faculty

Sue Baptiste
Professor
Professor Baptiste’s research interests focus on faculty development and roles in problem-based, learner-centred curricula, as well as acculturation of internationally educated health professionals into Canada professional practice.

Jackie Bosch
Associate Professor
Dr. Bosch’s area of research is post-stroke rehabilitation, causes of functional deficit, and clinical trial methodology.

Wenonah Campbell
Assistant Professor
Dr. Campbell’s research focuses on evaluating and implementing school-based models of collaborative service delivery. She has a particular interest in exploring how health professionals and educators can use an educational framework called “Universal Design for Learning” to support the inclusion and participation of children with disabilities at school.

Liliana Coman
Assistant Professor
Dr. Coman’s research interests include strategies for enhancing teaching and learning in higher education settings, the role of physiotherapy in primary care and physiotherapy models of practice.

Vanina Dal Bello-Haas
Associate Professor, Assistant Dean, Physiotherapy
Dr. Dal Bello-Haas’s research interests include older adults and individuals with neurodegenerative diseases, maximizing function and quality of life along the aging and disease continuum and innovations in teaching and learning.

Carol DeMatteo
Associate Professor
Professor DeMatteo’s area of research is in mild traumatic brain injury/concussion in children and pediatric obstetrical brachial plexus injuries.

Shaminder Dhillon
Assistant Professor
Professor Dhillon’s current research interests focus on students with disabilities in post-secondary professional programs. In the past, she has also examined advocacy, disability and professional issues for occupational therapy.

Jocelyn Harris
Assistant Professor
Dr. Harris is interested in developing treatment interventions that will maintain and promote recovery for individuals after stroke and traumatic brain injury when living in the community.

Bonny Jung
Associate Professor
Dr. Jung’s research focuses on interprofessional education, inclusive education, clinical education and curriculum development (i.e., problem-based learning, university-community partnerships).

Michelle Kho
Assistant Professor
Dr. Kho’s research focuses on novel early rehabilitation strategies to reduce weakness in critically ill patients, clinical trials in critically ill patients, knowledge translation, research methodology (systematic reviews, practice guidelines), and health services and outcome research. She is currently leading CYCLE, a multi-centre, pilot randomized trial of early in-bed cycling with mechanically ventilated patients.

Vickie Galea
Associate Professor
The main focus on Dr. Galea’s research is the study of motor behavior using neurophysiological assessments as a window into typical and altered motor control of the upper limb.

Rebecca Gewurtz
Assistant Professor
Dr. Gewurtz has been involved in research exploring work disability policy, employment and community participation among people with disabilities, and the impact of social policy on service delivery.

Lori Letts
Associate Professor, Assistant Dean, Occupational Therapy
Dr. Lett’s current research focuses on adults and older adults with chronic illnesses and helping them to manage their conditions in the context of the community. This involves work in primary care and other community settings.

Joy MacDermid
Professor
Dr. MacDermid’s research projects focus on developing, and transferring into practice, the best evidence for prevention, assessment, and management of musculoskeletal injuries and disorders.
Dr. MacIntyre’s research program is to maximize functional independence in people with or at risk for bone and joint problems. She investigates mechanisms and interventions that promote musculoskeletal health. She also evaluates measurement properties of imaging-based and clinical tools used to assess people for bone and joint problems.

Dr. Maly’s research program focuses on developing biomechanically-sound physical activity guidelines for adults with the most common forms of arthritis that are associated with aging.

Dr. Missiuna’s area of research is in children and youth with disabilities, developmental coordination disorder (DCD), applied health services research and knowledge translation.

Dr. Moll’s research interests relate to mental health/mental illness along the continuum from mental health promotion to illness intervention. Her primary program of research focuses on workplace mental health in healthcare organizations, and for young workers engaged in temporary employment. She is also interested in health promotion from an occupational perspective, and in qualitative, participatory methods.

Dr. Pierrynowski’s research program focuses on evaluating innovative modeling and statistical tools to understand the motion of the ankle, knee, spine, and neck, as well as examining how the application of these models allows health care professionals to better treat their patients.

Professor Pollock’s research interests include: evaluation of interventions and service delivery models, goal setting with children, school-based occupational therapy practice, and family-centered practice.

Dr. Richardson’s research interests include measurement and intervention issues to promote mobility and lower-extremity functioning in older adults, as well as risk factor assessment for decline of mobility and functioning with aging and the health transitions that older persons undergo in the process of disablement.

Professor Shimmell’s research interests are centered in educational research including reflective journaling in the development of OT competencies, preparation with student occupational therapists for international placement experiences, and capacity building in clinical education.

Dr. Solomon’s area of research is in HIV, disability and rehabilitation, and educational innovation as relates to problem-based learning and interprofessional education.

Dr. Solomon’s area of research is in HIV, disability and rehabilitation, and educational innovation as relates to problem-based learning and interprofessional education.

Dr. Tang’s area of research is in exercise and cardiovascular health among people with stroke and other neurological conditions, particularly as these relate to cardiovascular risk factors and prevention of cardiovascular disease.

Dr. Tryssenaar’s field of research includes curriculum development and evaluation, rural and remote education and practice, and interprofessional experience in online learning.

Dr. Vrkljan is the lead investigator of the McMaster-Candrive team, a Canadian Institutes for Health Research (CIHR)-funded initiative. Brenda’s area of research is in driver rehabilitation and community mobility across the lifespan, as well as technology use and participation in older adulthood.

Professor Winn’s research interests include orthopedics, primary care and human resource strategies to underserviced areas.

Professor Wojkowski’s research specialty is in primary health care, chronic disease self-management and emerging roles for rehabilitation.
### McMaster Catchment

| Clinical Placement Facilities | McMaster Athletics & Recreation | Sports Fitness Camp and Mini University Camp | Entwistle Power Occupational Therapy | ErinoakKids Centre for Treatment and Development | ErinoakKids Centre for Treatment and Development Mississauga | Functional Rehabilitation Inc. | Halton Health Care Oakville Trafalgar Hospital | Halton Healthcare Services - Georgetown Hospital | Halton Region Children’s Developmental Services | Halton Seniors Mental Health Outreach Program - St. Joseph’s Healthcare Hamilton | Hamilton Health Sciences - Chedoke Hospital | Hamilton Health Sciences - Hamilton General Hospital | Hamilton Health Sciences - Juravinski Hospital | Hamilton Health Sciences - McMaster Children’s Hospital | Hamilton Health Sciences - Regional Rehabilitation Centre | Hamilton Health Sciences - St. Peter’s Hospital | Hamilton Health Sciences - West Lincoln Memorial Hospital | Homewood Health | Hotel Dieu Shaver Health and Rehabilitation Centre | J. Fisher & Associates | Joseph Brant Hospital | Kindree OT Services | Lansdowne Children’s Centre | Lesya Dyk Occupational Therapy Services Inc. | Lyndsey Stevenato Children’s Therapy Services | MacH2ope | McMaster Family Health Team | Mohawk College Apps for Health | Niagara Health System - Greater Niagara General Hospital | Niagara Health System - St. Catharines General Hospital | Niagara Health System - Welland General Hospital | Participation House | Positive Living Niagara | Reach Out Centre for Kids (ROCK) | Royal Victoria Regional Health Centre | Saint Elizabeth Rehab | Six Nations Health Services | St. Joseph’s Health Care | St. Joseph’s Health Care Centre | St. Joseph’s Healthcare | Stonechurch Family Health Center | Stonehenge Therapeutic Community | The AIDS Network Hamilton, Halton, Haldimand, Norfolk and Brant | University Health Network - Altum Health Cambridge | William Osler Health System - Brampton Civic Hospital | William Osler Health System - Etobicoke General Hospital |
|-----------------------------|---------------------------------|----------------------------------|-------------------------------|---------------------------------|-----------------------------------|-----------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|-----------------------------|-----------------------------------|-----------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|
# NORTHERN STUDIES STREAM

<table>
<thead>
<tr>
<th>North Bay Regional Health Centre</th>
<th>North Bay</th>
<th>Ontario</th>
</tr>
</thead>
<tbody>
<tr>
<td>North East Community Care Access Centre</td>
<td>Sudbury</td>
<td>Ontario</td>
</tr>
<tr>
<td>North East Community Care Access Centre</td>
<td>Sault Ste. Marie</td>
<td>Ontario</td>
</tr>
<tr>
<td>Partners in Rehab</td>
<td>Thunder Bay</td>
<td>Ontario</td>
</tr>
<tr>
<td>Shelter House</td>
<td>Thunder Bay</td>
<td>Ontario</td>
</tr>
<tr>
<td>St. Joseph’s Care Group</td>
<td>Thunder Bay</td>
<td>Ontario</td>
</tr>
<tr>
<td>Sudbury Mental Health &amp; Addictions Centre</td>
<td>Sudbury</td>
<td>Ontario</td>
</tr>
<tr>
<td>Sudbury Outpatient Centre</td>
<td>Sudbury</td>
<td>Ontario</td>
</tr>
<tr>
<td>Superior Therapy Services</td>
<td>Nipigon</td>
<td>Ontario</td>
</tr>
<tr>
<td>Thunder Bay Regional Health Sciences Centre</td>
<td>Thunder Bay</td>
<td>Ontario</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Acquired Brain Injury (ABI) Outreach Team</th>
<th>Regina</th>
<th>Saskatchewan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baycrest Centre for Geriatric Care</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>Bridgepoint Health</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>Camp Winston</td>
<td>Kitchener</td>
<td>Ontario</td>
</tr>
<tr>
<td>Canadian Forces Health Services Group</td>
<td>London</td>
<td>Ontario</td>
</tr>
<tr>
<td>Chatham-Kent Health Alliance</td>
<td>Chatham</td>
<td>Ontario</td>
</tr>
<tr>
<td>CVE Inc.</td>
<td>Ottawa</td>
<td>Ontario</td>
</tr>
<tr>
<td>Fife House</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>Fraser Health Surrey Memorial Hospital</td>
<td>Surrey</td>
<td>British Columbia</td>
</tr>
<tr>
<td>Holland Bloorview Kids Rehabilitation Hospital</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>Kawartha Therapy Services Inc.</td>
<td>Peterborough</td>
<td>Ontario</td>
</tr>
<tr>
<td>Kelowna General Hospital</td>
<td>Kelowna</td>
<td>British Columbia</td>
</tr>
<tr>
<td>Nova Scotia Rehabilitation Centre</td>
<td>Halifax</td>
<td>Nova Scotia</td>
</tr>
<tr>
<td>OrionHealth</td>
<td>Vancouver</td>
<td>British Columbia</td>
</tr>
<tr>
<td>Providence Healthcare</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>Queen Square Family Health Team</td>
<td>Brampton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Regina Qu’Appelle Health Region</td>
<td>Regina</td>
<td>Saskatchewan</td>
</tr>
<tr>
<td>Restigouche Hospital Center</td>
<td>Campbellton</td>
<td>New Brunswick</td>
</tr>
</tbody>
</table>

# OUT OF CATCHMENT

<table>
<thead>
<tr>
<th>Riverview Health Centre</th>
<th>Winnipeg</th>
<th>Manitoba</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saint Elizabeth Health Care</td>
<td>Markham</td>
<td>Ontario</td>
</tr>
<tr>
<td>Seven Oaks General Hospital</td>
<td>Winnipeg</td>
<td>Manitoba</td>
</tr>
<tr>
<td>Southlake Regional Health Centre</td>
<td>Newmarket</td>
<td>Ontario</td>
</tr>
<tr>
<td>St. Joseph’s Healthcare London</td>
<td>London</td>
<td>Ontario</td>
</tr>
<tr>
<td>St. Joseph’s Southwest Centre for Forensic Mental Health Care</td>
<td>St. Thomas</td>
<td>Ontario</td>
</tr>
<tr>
<td>St. Thomas Elgin General Hospital</td>
<td>St. Thomas</td>
<td>Ontario</td>
</tr>
<tr>
<td>Stan Cassidy Centre for Rehabilitation</td>
<td>Fredericton</td>
<td>New Brunswick</td>
</tr>
<tr>
<td>Thames Valley Children’s Centre</td>
<td>London</td>
<td>Ontario</td>
</tr>
<tr>
<td>The Dance Ability Movement</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>The Ottawa Hospital</td>
<td>Ottawa</td>
<td>Ontario</td>
</tr>
<tr>
<td>The Royal Mental Health Care &amp; Research</td>
<td>Ottawa</td>
<td>Ontario</td>
</tr>
<tr>
<td>Trillium Health Partners Infant and Child Development Services Peel</td>
<td>Mississauga</td>
<td>Ontario</td>
</tr>
<tr>
<td>University Health Network</td>
<td>Toronto</td>
<td>Ontario</td>
</tr>
<tr>
<td>Vancouver Coastal Health</td>
<td>Vancouver</td>
<td>British Columbia</td>
</tr>
<tr>
<td>WorkSafeNB</td>
<td>Saint John</td>
<td>New Brunswick</td>
</tr>
</tbody>
</table>

# INTERNATIONAL

<table>
<thead>
<tr>
<th>Amar Seva Sangam</th>
<th>Tamil Nadu</th>
<th>India</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disabled Persons Association of Bhutan</td>
<td>Thimphun</td>
<td>Bhutan</td>
</tr>
<tr>
<td>Gisborne Hospital</td>
<td>Gisborne</td>
<td>New Zealand</td>
</tr>
<tr>
<td>Therapy Works</td>
<td>Port of Spain</td>
<td>Trinidad and Tobago</td>
</tr>
<tr>
<td>Total Rehabilitation</td>
<td>San Juan</td>
<td>Trinidad and Tobago</td>
</tr>
<tr>
<td>Windreach</td>
<td>Warwick</td>
<td>Bermuda</td>
</tr>
</tbody>
</table>
## Clinical Placement Facilities

### McMaster Catchment

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>City</th>
<th>Province</th>
</tr>
</thead>
<tbody>
<tr>
<td>Absolute Physiotherapy &amp; Wellness</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Absolute Rehabilitation &amp; Wellness</td>
<td>Stoney Creek</td>
<td>Ontario</td>
</tr>
<tr>
<td>Activ8 Wellness Studio</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>AIM Health Group</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Alton Physiotherapy and Sports Clinic</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Athlete’s Care</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Avenue Physiotherapy</td>
<td>Brantford</td>
<td>Ontario</td>
</tr>
<tr>
<td>Be in Motion Physiotherapy</td>
<td>Oakville</td>
<td>Ontario</td>
</tr>
<tr>
<td>Beamsville Physiotherapy</td>
<td>Beamsville</td>
<td>Ontario</td>
</tr>
<tr>
<td>Brant Community Healthcare System - Brantford General Site</td>
<td>Brantford</td>
<td>Ontario</td>
</tr>
<tr>
<td>CBI Home Health</td>
<td>Guelph</td>
<td>Ontario</td>
</tr>
<tr>
<td>CBI Physiotherapy and Rehabilitation Centre</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Cobblestone Medicine and Rehab</td>
<td>Paris</td>
<td>France</td>
</tr>
<tr>
<td>David Braley Sport Medicine and Rehabilitation Centre</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Dr. Bob Kemp Hospice</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - Dundas Community Physiotherapy</td>
<td>Dundas</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - Fairview Rehabilitation Center</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - Mobility Orthopaedic Rehab Centre</td>
<td>Brantford</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - Performance Physiotherapy</td>
<td>Stoney Creek</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - The Arthritis and Sports Medicine Centre</td>
<td>Ancaster</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - Upper James Physiotherapy &amp; Sports Medicine</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>DSD Management - West End Physiotherapy</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eramosa Physiotherapy Associates (EPA) - Acton</td>
<td>Halton Hills</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eramosa Physiotherapy Associates (EPA) - Elora</td>
<td>Elora</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eramosa Physiotherapy Associates (EPA) - Georgetown</td>
<td>Georgetown</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eramosa Physiotherapy Associates (EPA) - Guelph</td>
<td>Guelph</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eramosa Physiotherapy Associates (EPA) - Health and Performance Centre</td>
<td>Guelph</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eramosa Physiotherapy Associates (EPA) - Orangeville</td>
<td>Orangeville</td>
<td>Ontario</td>
</tr>
<tr>
<td>ErinoakKids</td>
<td>Brampton</td>
<td>Ontario</td>
</tr>
<tr>
<td>ErinoakKids</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>ErinoakKids</td>
<td>Mississauga</td>
<td>Ontario</td>
</tr>
<tr>
<td>Escarpment Sports Medicine Centre</td>
<td>Milton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Fairview Rehabilitation Center</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Fit For Life Physiotherapy</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Flamborough Physiotherapy and Rehabilitation</td>
<td>Waterdown</td>
<td>Ontario</td>
</tr>
<tr>
<td>Grand River Physiotherapy</td>
<td>Fergus</td>
<td>Ontario</td>
</tr>
<tr>
<td>Guelph General Hospital</td>
<td>Guelph</td>
<td>Ontario</td>
</tr>
<tr>
<td>Halldimand Physiotherapy Centre</td>
<td>Caledonia</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Council of Aging</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Family Health Team</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - CDRP</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - Hamilton General Site</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - Juravinski Hospital</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - McMaster Children’s Hospital</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - McMaster University Medical Centre</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - Regional Rehabilitation Centre</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - St. Peter’s Hospital</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hamilton Health Sciences - West Lincoln Memorial Hospital</td>
<td>Grimsby</td>
<td>Ontario</td>
</tr>
<tr>
<td>Headwaters Health Care Centre</td>
<td>Orangeville</td>
<td>Ontario</td>
</tr>
<tr>
<td>Headwaters Physiotherapy</td>
<td>Orangeville</td>
<td>Ontario</td>
</tr>
<tr>
<td>Health First Rehabilitation &amp; Consultants</td>
<td>Dundas</td>
<td>Ontario</td>
</tr>
<tr>
<td>Hotel Dieu Shaver Health and Rehabilitation Centre</td>
<td>St.Catharines</td>
<td>Ontario</td>
</tr>
<tr>
<td>InFocus Rehabilitation Centre</td>
<td>Georgetown</td>
<td>Ontario</td>
</tr>
<tr>
<td>ISM Rehab</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Joseph Brant Memorial Hospital</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Kinetic Physiotherapy</td>
<td>Burlington</td>
<td>Ontario</td>
</tr>
<tr>
<td>Lansdowne Children’s Centre</td>
<td>Brantford</td>
<td>Ontario</td>
</tr>
<tr>
<td>Lifemark - ProActive Therapeutics</td>
<td>Oakville</td>
<td>Ontario</td>
</tr>
<tr>
<td>LifeMark Health - The Centre for Pelvic Health</td>
<td>Cambridge</td>
<td>Ontario</td>
</tr>
<tr>
<td>LifeMark Physiotherapy - Mohawk Road East</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>MAC H2OPE Clinic</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>McMaster University - Physical Activity Centre of Excellence</td>
<td>Hamilton</td>
<td>Ontario</td>
</tr>
<tr>
<td>Meadowlands Physiotherapy</td>
<td>Ancaster</td>
<td>Ontario</td>
</tr>
<tr>
<td>Motion Physio</td>
<td>Ancaster</td>
<td>Ontario</td>
</tr>
<tr>
<td>Niagara Children’s Centre</td>
<td>St.Catharines</td>
<td>Ontario</td>
</tr>
<tr>
<td>Niagara Health System - Greater Niagara General Site</td>
<td>Niagara Falls</td>
<td>Ontario</td>
</tr>
<tr>
<td>Location</td>
<td>Province</td>
<td>City</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>-----------</td>
<td>------------</td>
</tr>
<tr>
<td>Niagara Health System - Port Colborne General Site</td>
<td>Ontario</td>
<td>Port Colborne</td>
</tr>
<tr>
<td>Niagara Health System - St. Catharines General Hospital Site</td>
<td>Ontario</td>
<td>St. Catharines</td>
</tr>
<tr>
<td>Niagara Health System - Welland County Hospital Site</td>
<td>Ontario</td>
<td>Welland</td>
</tr>
<tr>
<td>Niagara Orthopaedic Institute</td>
<td>Ontario</td>
<td>Niagara Falls</td>
</tr>
<tr>
<td>North Hamilton Community Health Care Centre</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
<tr>
<td>Norwich Rehab</td>
<td>Ontario</td>
<td>Norwich</td>
</tr>
<tr>
<td>Nova Healthnet - Niagara Falls</td>
<td>Ontario</td>
<td>Niagara Falls</td>
</tr>
<tr>
<td>Peak Performance</td>
<td>Ontario</td>
<td>Stoney Creek</td>
</tr>
<tr>
<td>Physio-Care Services</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
<tr>
<td>PT Health - Fairview Physio and Wellness Centre</td>
<td>Ontario</td>
<td>Brantford</td>
</tr>
<tr>
<td>PT Health - Harvester Road Physiotherapy</td>
<td>Ontario</td>
<td>Burlington</td>
</tr>
<tr>
<td>PT Health - Limeridge Physiotherapy &amp; Rehabilitation Centre</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
<tr>
<td>PT Health - Mountain Physiotherapy and Rehabilitation</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
<tr>
<td>PT Health - Queenston Physiotherapy &amp; Rehabilitation Centres</td>
<td>Ontario</td>
<td>Stoney Creek</td>
</tr>
<tr>
<td>PT Health - Trafalgar Physiotherapy</td>
<td>Ontario</td>
<td>Oakville</td>
</tr>
<tr>
<td>Rehab Link Physiotherapy</td>
<td>Ontario</td>
<td>Burlington</td>
</tr>
<tr>
<td>Rehabilit Physiotherapy Clinic</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
<tr>
<td>Reinholt Rehabilitation Services</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
<tr>
<td>Ross Rehabilitation</td>
<td>Ontario</td>
<td>Hamilton</td>
</tr>
</tbody>
</table>

**NORTHERN STUDIES STREAM**

<table>
<thead>
<tr>
<th>Location</th>
<th>Province</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atikokan General Hospital</td>
<td>Ontario</td>
<td>Atikokan</td>
</tr>
<tr>
<td>Firefly</td>
<td>Ontario</td>
<td>Kenora</td>
</tr>
<tr>
<td>George Jeffrey Children’s Treatment Centre</td>
<td>Ontario</td>
<td>Thunder Bay</td>
</tr>
<tr>
<td>Kenora Physiotherapy and Sports Injury Centre</td>
<td>Ontario</td>
<td>Kenora</td>
</tr>
<tr>
<td>Lake of the Woods District Hospital</td>
<td>Ontario</td>
<td>Kenora</td>
</tr>
<tr>
<td>Lakehead Sports Medicine Clinic</td>
<td>Ontario</td>
<td>Thunder Bay</td>
</tr>
<tr>
<td>Nipigon District Memorial Hospital</td>
<td>Ontario</td>
<td>Nipigon</td>
</tr>
<tr>
<td>Northern Physiotherapy &amp; Sports Injury Clinic</td>
<td>Ontario</td>
<td>Thunder Bay</td>
</tr>
</tbody>
</table>

**OUT OF CATCHMENT**

<table>
<thead>
<tr>
<th>Location</th>
<th>Province</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baycrest</td>
<td>Ontario</td>
<td>Toronto</td>
</tr>
<tr>
<td>Cambridge Memorial Hospital</td>
<td>Ontario</td>
<td>Cambridge</td>
</tr>
<tr>
<td>CBI Health Group - Richmond Hil</td>
<td>Ontario</td>
<td>Richmond Hil</td>
</tr>
<tr>
<td>College of Physiotherapists of Ontario</td>
<td>Ontario</td>
<td>Toronto</td>
</tr>
<tr>
<td>Cooper Physiotherapy Clinic</td>
<td>Ontario</td>
<td>Osgoode</td>
</tr>
<tr>
<td>Haley Rehab</td>
<td>Ontario</td>
<td>Ottawa</td>
</tr>
<tr>
<td>Hanover Physiotherapy &amp; Sports Rehabilitation</td>
<td>Ontario</td>
<td>Hanover</td>
</tr>
<tr>
<td>Interprofessional University Clinic in Primary Care - University of Ottawa</td>
<td>Ontario</td>
<td>Ottawa</td>
</tr>
<tr>
<td>Leamington District Memorial Hospital</td>
<td>Ontario</td>
<td>Leamington</td>
</tr>
<tr>
<td>Maximum Potential Physiotherapy</td>
<td>Ontario</td>
<td>Thunder Bay</td>
</tr>
<tr>
<td>Ottawa Hospital - Rehabilitation Centre</td>
<td>Alberta</td>
<td>Ottawa</td>
</tr>
<tr>
<td>Physiotherapy on Wheels</td>
<td>Ontario</td>
<td>Mississauga</td>
</tr>
<tr>
<td>Queensway Carleton Hospital</td>
<td>Ontario</td>
<td>Nepean</td>
</tr>
<tr>
<td>Restore Physiotherapy Clinic</td>
<td>Ontario</td>
<td>Oakville</td>
</tr>
<tr>
<td>Royal Columbian Hospital</td>
<td>Ontario</td>
<td>New Westminster</td>
</tr>
<tr>
<td>Royal University Hospital</td>
<td>Saskatchewan</td>
<td>Saskatoon</td>
</tr>
<tr>
<td>The Cambridge Centre for Health &amp; Wellness</td>
<td>Ontario</td>
<td>Cambridge</td>
</tr>
<tr>
<td>The Physio Centre</td>
<td>Ontario</td>
<td>Trenton</td>
</tr>
<tr>
<td>Toronto Rehab Institute - Lyndhurst Centre</td>
<td>Ontario</td>
<td>Toronto</td>
</tr>
</tbody>
</table>

**INTERNATIONAL**

<table>
<thead>
<tr>
<th>Location</th>
<th>Province</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayo General Hospital</td>
<td>Co., Mayo</td>
<td>Castlebar</td>
</tr>
<tr>
<td>Mayo General Hospital</td>
<td>Ireland</td>
<td>Castlebar</td>
</tr>
<tr>
<td>Mayo General Hospital</td>
<td>Ireland</td>
<td>Castlebar</td>
</tr>
<tr>
<td>Mayo General Hospital</td>
<td>Ireland</td>
<td>Castlebar</td>
</tr>
<tr>
<td>Mayo General Hospital</td>
<td>Ireland</td>
<td>Castlebar</td>
</tr>
<tr>
<td>Mayo General Hospital</td>
<td>Ireland</td>
<td>Castlebar</td>
</tr>
</tbody>
</table>

www.srs-mcmaster.ca | 29
Clinical Faculty & Professional Associates

**Lecturers (Adjunct)**
- Banks, Anthea
- Cammarata, Michael
- Ferguson, Eric
- Fonstad, Patricia
- Garner, Frances
- Lee, Jennifer
- MacLeod, Rebecca
- Mangoff, Stephen
- McMahon, Patricia
- Medeiros, Patricia
- Mercier, Deana
- Millar, Paulette
- Morrison, Nicholas
- Murphy-Turluk, Anne
- Simpson, Gail
- Smith, Anne
- Stewart, Kelly
- Westbrook, Elizabeth
- Wuesten-Smith, Deborah
- Yee, Silvana

**Clinical Lecturers**
- Bailey, Annette
- Bauer, Martha
- Case, Patricia
- Fisher, Janet
- Fraser-MacDougall, Vicki
- Gambbarotto, Cindy
- Morrison, Andrea
- Newman, Anne
- Peace, Deborah
- Reid, Julie
- Stazyk, Kathryn
- Toal, Coleen

**Clinical Professor**
- Geddes, Lynne

**Associate Clinical Professors**
- Dilworth, Peter
- Edwards, Mary
- Gross, Anita
- Jecker, Justine
- King, Gillian
- Linéker, Sydney
- Michlovitz, Susan
- Miller, Patricia
- Moreland, Julie
- O’Brien, Mary Ann
- Paliwako, Robert
- Parkinson, Bill
- Russell, Dianne
- Spadoni, Gregory
- Strong, Susan
- Triano, John (Jay)

**Assistant Clinical Professors**
- Aird, Jeffrey
- Baker, Eric
- Balser, Brad
- Bressler, Sandra
- Chan, Michael
- Charbonneau, Kristen
- Chisholm, Brock
- Chowdhury, Sophia
- Daniel, Sylvia
- Davidson, Shivaun
- Ditchburn, Lisa
- Eberts, Dianna
- Ehtampam, Claudia
- Fleck, Rebecca
- Foley, James (Jim)
- Francis, Deborah (Debi)
- Freeman, Matt
- French, Esme
- Gaik, Sandy
- Gjertsen, Deborah
- Gow, Shirley
- Grum, Rosa Maria (Rose Mary)
- Hale, Chelsea
- Kierfer Preston, Gloria
- Lazenby, Dale
- Lee, Diane
- Lee, Linda-Joy
- Long, Kristin
- MacLeod, Anne
- Mahieu, Elaine
- Majumdar (Samantal, Sampa
- Manson, Gillian
- Mayens, Elisa
- McCaul, Robert
- McEvoy, Esther
- McGrath, Colleen
- McGrath, Kristen
- Meester, Stacey
- Mensink, Andrew
- Morgan, Ashley
- Mulkeewich, Miriam
- Murphy, Christina (Tina
- Niewiadomski, Stella
- Nowak, Christina
- Parise, Kristen
- Park, Debbie
- Park, Jonathan
- Patton, Stephen
- Raman, Jayaprakash
- Rampton, Glenn
- Robinson, Susan
- Rogers, Tim
- Sanderscock-Ho, Jane
- Sawsan, Mariam
- Schnurr-Smith, Ronda
- Secen, John
- Smith, Ashley
- Stavness, Carrie
- Steele, Jordi
- Strike, Karen
- Tait, Diane
- Valadares, Robin
- Valiely, Michael
- Vaz, Daren
- White, Catherine
- Wizowski, Lindsay

**Professor (Part time)**
- MacDermid, Joy

**Assistant Professor (Part time)**
- Sinden, Kathryn

**Professional Associates**
- Accettura, Angela
- Alderson, Monica
- Alexander, Milinda
- Ballie, Bonnie
- Ball, Pamela
- Binnington, Luke
- Birckett, Leslie
- Bishop (Ashforth), Helen
- Bladon, Ian
- Bonnyman, Alison
- Bradshaw, Michelle
- Britain, Tania
- Buchko, Bonnie
- Burke-Gaffney, Jan
- Caric, Christy
- Carroll, Kathy
- Chalova, Katrina
- Cleary, Francine
- Cushing, Jennifer
- Denis, Suzanne
- Derouet (Niven), Leigh Ann
- Dobson-Brown, Kate
- Domanski, Susan
- Empey, Brian
- Everest (Philpot), Angela
- Fairfield, Sarah
- Falcioff, Alfredo
- Ferguson, Michaela
- Firth, Jennifer
- Florian, Carla
- Fried, Tom
- Galbraith, Deanna
- Gasparelli, Katie
- Geronomo, Julie
- Good, Colleen
- Gough, Sarah
- Haramule, Daphne
- Haworth-Coomer, Deb
- Henderson, Jennifer
- Hendry (Jardine), Cheryl
- Hettinger, Leon
- Hirano, Gord
- Hoogsteen, Katherine
- Huschilt, Mark
- Jager, Paul Andre
- Jaworski, Karl
- Kasaboski, Joanne
- Krouatsch, Elizabeth
- Kavka, Stefany
- Ladak, Aliza
- Lee, Kara
- Lee, Kyle
- Leslie, James
- Loft, Archana
- Lyons, Brett
- MacKie, Meaghan
- Maffey, Lorrie
- Mannen, Janet
- Margallo, Karen
- Marley, Taffina
- McCaughan, Magda
- McQueen, Dan
- Nagpal, Aarti
- Packham, Tara Lisa
- Panagakos, Diane
- Perrett, Laurie
- Piatek, Stefanie
- Pillinini, Linda
- Poling, Mike
- Pond-Clements, Erika
- Pratt, Christine
- Preston, Gloria
- Przytanski, Sally
- Putignano O’Donnell, Kara
- Ramsaran, Kalinda
- Regehr, Tom
- Rich, Sharon
- Rose, Sarah
- Sanderson, Brett
- Schinke, Katie
- Schwellnus, Heidi
- Smith, Jenna
- Starsinecs, John
- Stevens-Sutherland, Melanie
- Stott, Matthew
- Suppiah, Raj
- Synnott, Robyn
- Van Es, Judy
- Van Sickle, Heather
- Vaughan, Heather
- Verst, Bas
- von Zweck, Claudia
- Westaway, Michael
- Worne-Laing, Deana
Sue Baptiste


Jackie Bosch


Wenonah Campbell


Vanina Dal Bello-Haas


Carol DeMatteo


Shami Dillon


Briano Di Rezze


**Vickie Galea**


**Rebecca Gewurtz**


**Jocelyn Harris**


**Bonny Jung**


**Michelle Kho**


**Lori Letts**


Joy MacDermid


Norma MacIntyre

Prospecting in the Field of Developmental Physical Evidence for Developing an Intervention.


Sandra Moll


Michael Pierrynowski


Nancy Pollock


Julie Richardson


**Lorie Shimmell**


**Patty Solomon**


**Debra Stewart**


Christopher Winn


Sarah Wojkowski

1970s
- Mohawk College began diploma programs in physiotherapy (PT) and then occupational therapy (OT).

1989 - the Ontario Council of University Affairs approved the development of two new undergraduate degrees at McMaster University: Bachelor of Health Sciences in Physiotherapy and Bachelor of Health Sciences in Occupational Therapy. Programs were located in the Mohawk Health Sciences Building on the grounds of Chedoke Hospital.

1994 - the Hamilton Teacher’s College Building on the McMaster grounds was refurbished for the temporary occupancy of the School.

1999 - Development of the first professional Master of Science (OT) and Master of Science (PT) programs in Canada.

2000 - SRS moved to the Institute of Applied Health Sciences (IAHS).

2000 - Master’s thesis program in Clinical Health Sciences (Rehabilitation Science) commenced.

2006 - online course-based option in the Master’s in Rehabilitation Science was implemented to provide a web-based, distance education program for health care professionals to advance their knowledge and upgrade their qualifications.

2007 - Ph.D. first class, to educate rehabilitation scientists to become experts in rehabilitation research and into practice and policy.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.

2010 - Master in Health their first class, in the DeGroote Business.