



VINAYAKA MISSION'S RESEARCH FOUNDATION

(Deemed to be University under section 3 of the UGC Act 1956)

Post Graduate Diploma in Early Intervention- PGDEI

NORMS, GUIDELINES, AND COURSE CONTENT

Effective from Academic Session 2023 – 24

One year duration

**FACULTY OF REHABILITATION AND BEHAVIOURAL SCIENCES
DEPARTMENT OF SPEECH - LANGUAGE PATHOLOGY,
SCHOOL OF REHABILITATION AND BEHAVIOURAL SCIENCES (SRBS)
AARUPADAI VEEDU MEDICAL COLLEGE AND HOSPITAL CAMPUS
Pondicherry - Cuddalore main road Kirumampakkam – 607 402**

www.daslpvmrf.edu.in

Post Graduate Diploma in Early Intervention

Regulations, Norms, Scheme of Examination and Curriculum – (2023-24) (Annual scheme)

1.0 Name of the course offered

The nomenclature of the program shall be Post Graduate Diploma in Early Intervention PGDEI shall be the short form.

2.0 Objectives of the PGDEI program

The primary objectives of the PGDEI program are:

1. To equip personnel to assess, plan and implement early intervention to infants and toddlers at risk & with developmental delays.
2. To develop competencies in organizing early intervention services.
3. To impart techniques of working with families and community for effective intervention.
4. To develop competency in report writing, record maintenance and communication.
5. To facilitate and integrate the children into community programmes and family guided intervention.

3.0 Duration of the program

One complete academic year

4.0 Medium of instruction

Medium of instruction shall be English

5.0 Eligibility for admission

Candidates who have passed:

- a) M.B.B.S./BAMS/BUMS/BSMS/BNYS or Equivalent Degree
- b) BOT/BPT/BASLP/B.Ed-SE/ or Equivalent Degree
- c) B.Sc Nursing
- d) Post Graduate in Psychology/Social Work/Special Education/Child Development or Equivalent Degree with 50% aggregate marks in case of general candidates and 40% marks in case of SC and ST candidates are eligible to apply for this course

5.1 Age limit: No age limit.

6.0 Program Structure

Theory	500 hours
Clinical Practicum	800 hours
Total	1300 hours

CONTENT OF THE COURSE

6.1 THEORY

PAPER TITLE

- I. Neurobiology
- II. Child Development and Learning

- III. Assessment, Intervention and Evaluation
- IV. Therapeutics
- V. Family and community

6.2 PRACTICAL

- I. Case history and developmental assessments
- II. Therapeutics Assessment, Intervention and Evaluation
- III. Individualized Family Assessment
- IV. Individualized Early Intervention Programming (IEI)

7.0 Credit

Minimum Credit Requirements:

The minimum credit points required for the award of **PGDEI** is 42. The credits are distributed as shown in Table 1.

The credit for each subject / paper is calculated as follows:

Theory: 1 hour = 2 credits, 3 hours per week= 6 credits, 6 X 5 = 30 credits in total for theory
 Clinicals: 2 hours = 1 Credit, 6 hours per week= 3 credits, 3 X 4= 12 credits in total for practical

Table 1:

Paper	Name of the paper	Univ, marks	Internal marks	Max marks	Univ exam duration	Credits
Paper- I	Neurobiology	80	20	100	3 hours	6
Paper- II	Child development and learning	80	20	100	3 hours	6
Paper-III	Assessment, Intervention and Evaluation	80	20	100	3 hours	6
Paper-IV	Therapeutics	80	20	100	3 hours	6
Paper-V	Family and Community	80	20	100	3 hours	6
Clinical Practicum- I	Case History and Developmental Assessments	100	50	150	-	3
Clinical Practicum- II	Therapeutics Assessment and Intervention Evaluation	100	50	150	-	3
Clinical Practicum- III	Individualised Family Assessment	100	50	150	-	3
Clinical Practicum- IV	Individualised Early intervention Programming (IEIP)	100	50	150	-	3
	Total	800	300	1100		42 credits

8.0 Grading System:

Table 2 : Letter grades and grade points equivalent to percentage of marks and performances:

Range of % of Marks	Letter Grade	Grade Point	Class
95-100	O++	10.0	*First Class with distinction
90-94	O+	9.5	
85-89	O	9.0	
80-84	A++	8.5	
70-79	A+	8.0	
60-69	A	7.0	First Class
55-59	B+	6.0	Second Class
51-54	B	5.5	
40-50	C	5.0	Pass
< Minimum Pass	U	0	RA (Reappear)
Absent	U	0	AB

Computation of Credit Points and Cumulative Grade Point Average (CGPA)

The credit points are calculated by multiplying grade point and credit for each subject. Example is given in the following table.

Table 3: Example : Grades and Grade Points

Course Title	Credits (C)	Grade Letter	Grade Point	Credit Point (Credit X Grade)
Neurobiology	6	O++	10	6 X 10= 60
Child development and Learning	6	O	9	6 X 9= 54
Assessment, intervention and evaluation	6	A+	8	6 X 8= 48
Therapeutics	6	C	5	6X5= 30
Family and Community	6	B+	6	6X6= 36
Case History and Developmental Assessments	3	B+	6	3 X 6= 18

(Clinical Practicum)				
Therapeutics assessment and intervention evaluation (Clinical Practicum)	3	B	5.5	3 X 5.5 = 16.5
Individualized Family Assessment (Clinical Practicum)	3	A++	8.5	3 X 8.5 = 25.5
Individualized Early Intervention Programming (IEIP) (Clinical Practicum)	3	B+	6	3 X 6 = 18
Total	42			306
Thus, CGPA = $306/42 = 7.29$				

The CGPA shall be rounded off to 2 decimal points and reported in the transcripts.

9.0 Attendance

9.1 Attendance shall not be less than 80% in theory and 90% in Clinical Practicum in the academic year for students to be eligible to appear for examination at the end of the year. Also should have 50% in the Internal assessment of all the courses to be eligible to write the final examination.

9.2 Candidates who cannot appear for the examination for want of attendance will be declared failed and will have to repeat the entire program to be eligible to appear for the exams subsequently.

9.3 Condonation of shortage of attendance in genuine cases to a maximum of 5% shall be from the Vice-Chancellor of the VMRF-DU.

10.0 Examination Pattern

10.1 The examination pattern and papers shall be as shown in the table below:

Paper	Name of the paper	Univ, marks	Internal marks	Max marks
Paper- I	Neurobiology	80	20	100
Paper- II	Child development and learning	80	20	100
Paper-III	Assessment, Intervention and Evaluation	80	20	100
Paper-IV	Therapeutics	80	20	100
Paper-V	Family and Community	80	20	100
Clinical Practicum -I	Case history and developmental assessments [Practical]	100	50	150
Clinical Practicum -II	Therapeutics ,Assessment and Intervention Evaluation	100	50	150
Clinical Practicum -III	Individualised Family Assessment	100	50	150
Clinical Practicum -IV	Individualized Early Intervention Programming (IEIP) [Practical]	100	50	150
	Total	800	300	1100

10.1 Course content shall be as in **Annexure 1**

10.2 Board of Examiners

10.2.1 There shall be a Board of Examiners for scrutinizing and approving the question papers as well as scheme of valuation

10.2.2 Fifty percent of the members in the Board of Examiners shall be from outside the institution.

10.3 Pattern of Question Paper – End of Year Examination

Theory	Duration:3hours
Essays (Answer 4 out of 5) (4 x 15)	60 marks
Short notes (Answer 4 out of 5) (4 x 5)	20 marks
Total	80 marks

10.4 Internal Marks

Internal Marks for Each Theory: 20 Marks (Maximum)

2 Assignments (Preparation and Presentation) X 5 Marks =10 Marks

Two Tests X 5 Marks= 10 Marks

Total = 20 Marks

Internal Marks for Each Practical: 50 Marks (Maximum)

Apparatus/Tools =20 Marks

Execution (Data Collection) = 10 Marks

Data Process and Submission of Report =20 Marks

Total = 50 Marks

10.5 Clinical examinations shall be conducted by the designated one internal faculty and one external faculty at the end of the year.

11. Criteria for passing

11.1 The student is required to obtain a minimum of 50% in each of the theory papers, internal assessment, practical exams for a pass.

11.2 Maximum number of attempts for any paper / clinical practicum shall be three inclusive of first attempt. There will be a supplementary examination.

12.0 Award of Rank

Ranks and medals shall be awarded based on final CGPA for candidates who pass in the first attempt.

13.0 Award of Degree

The University shall award the degree and issue a certificate only after the candidates successfully complete all the examinations stipulated.

Course Content

Paper I: NEUROBIOLOGY

No. of hrs.100
No. of marks:100

OBJECTIVES:

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

UNIT I : Anatomy and Embryology of the Nervous system

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

Unit II: Physiology and Maturation of the Nervous System

Neurons, synapsis, transmission, Myelination, Organization of brain, Cortical subcortical relay system, Processing of information (Fituation, organization, response, integration).

UNIT III: Functions of the Nervous System including special senses

- Specific areas and functions - Frontal, parietal, temporal, Occipital, Basalganglia, Cerebellum, Mid brain, Pons, Medulla oblongata, Autonomic neurosystem, Limbic System, Spinal cord, Spinal arc, Nervous system pathways.
- Special senses - Vision, Audiotomy, Vestibular, Tactile, Proprioception and Kinaesthetic

Unit IV: Determinants of risk factors and Developmental abnormalities

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

Unit V: Neurofunctional indicators of early brain insults

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

Unit VI: Prevention of developmental disabilities

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

Paper II: Child Development and Learning

No. of hrs.100
No. of marks:100

OBJECTIVES:

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

Unit I: Growth and Nutrition

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

UNIT II: Motor development and Sensory Perceptual development

- Motor development - Principles of motor development, Motor development in prone, supine sitting & standing, posture, tone, movement, joints, Gait, Fine motor development, Motor development for survival, protection and learning and Atypical development.
- Sensory Perceptual development - Sensation, Perception and Specific sensory perceptual development.

UNIT III: Cognitive Development

- Theories of cognitive development, influencing cognitive development. Stages of cognitive development and Factors

UNIT IV: Social and Emotional Development

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

UNIT V: Speech language communication development

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

UNIT VI: Child rearing

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

Paper III: Assessment, Intervention and Evaluation

No. of hrs.100
No. of marks:100

OBJECTIVES:

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

Unit 1: Assessment

- Introduction to Assessment – Definition, purposes, methods of collecting data.
- Informal and formal assessment tools/instruments – Norm references, criterion referenced, curriculum referenced observational methods, family centred assessment, Involving families as active participants in assessment progress.
- Introduction to assessment tools used in Early intervention, selection of assessment tools, administering and communicating assessment results.

Unit II: Individualised Early Intervention Programming

- Development and implementation of the individualised early intervention programme (IEIP) and individual family service plan IFSP.
- Intervention strategies – prompting and fading, modelling and imitation, demonstration, task analysis, shaping and chaining, reinforcement – types of reinforcers, schedules of reinforcement, music and play activities, peer tutoring.

Unit III: Evaluation

- Definition of evaluation, difference between assessment and evaluation.
- Types of evaluation – formative, summative.
- Programme monitoring, summarizing and evaluating the acquisition of child and family outcomes.

Paper: IV Therapeutics

No.of hrs.100
No. of marks:100

OBJECTIVES:

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

Part: A Physio therapy

Unit I: Concepts, theories, Assessment and Intervention

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

Unit II: Recent trends and issues.

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

Part B: Occupational Therapy

Unit I: Concepts, theories, assessment and intervention

- Physiological frame of reference, Cognitive frame of reference, Psycho dynamic frame of reference and Humanist frame of reference.
- Performance components, Sensory processing, Motor performance (Posture, hand function, etc.), Occupational components, Breathing, Feeding and Play.
- Determining need for therapy, Setting therapy goals, Selecting techniques and Identifying appliances / assistive devices
- Intervention strategies- Sensory integration- posture, positioning, breathing, feeding, eating, sensory perception and Intervention for multiple handicaps.
- Methods of evaluation and record keeping.

Unit II: Recent trends and issues:

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

Part C - Speech, Language and Communication

Unit I : Theories, concepts, assessment and evaluation

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

children, theoretical basis of intervention - model, principles content, context, procedures. Strategies linking assessment & intervention, multi-axial procedure, descriptive proforma, communicating assessment, details to other professionals, Writing up a program & follow up and inter professional communication.

Unit II: Recent trends & issues

- Organization of services, Multidisciplinary team work, Available resources & utilization. Local adaptations and Research.

Paper V: Family and Community

No. of hrs:100
No. of marks:100

OBJECTIVES:

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

Unit : I Parents and family

- Inference of a child with developmental delays on family.
- Inferencing factors, parental attitudes, parent child interactions, self-esteem, parental stress and depression, parent training programmes, parent to parent support programmes.
- Family system, Family functioning, family support, family resources, Family strengths,
- family needs and family coping and adaptive mechanism.

Unit II: Community

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

Unit III: Organizing early intervention services

- Service delivery models/settings, functions of team.
- Organization and development of program in the community.
- Establishing linkages with pre-school based on development and learning experiences and teaching strategy.

PRACTICALS

PAPER 1: Case History Taking and Developmental Assessment

No. of hrs:200

No. of marks: 150

Objectives:

At the end of the year the student is expected to

- Take case history in an infant and toddler
- Assess using developmental scale and to communicate the assessment results to parents and family.

Procedure:

Detailed case history of children below 3 years in 3 cases.

Developmental assessment in 2 cases in the age range of 0-3 years.

Paper II: Therapeutics

No. of hrs:200

No.ofmarks:150

Objectives:

At the end of the year the student is expected to:

- Assess and plan. an appropriate in the areas of physiotherapy, occupational therapy, speech language and communication.
- Evaluate the outcome of intervention and submit the report.

Procedure:

- students will be given orientation on assessment in all therapies (PT, OT, ST)
- students will assess infants and toddlers under supervision and plan for remediation programme.

At the end of practicals the students will make submissions of 6 case records

- 2 cases for physiotherapy,
- 2 cases for occupational therapy
- 2 cases for speech, language and communication.

Paper III: Individualised Family Assessment

No. of hrs:200

No. of marks: 150

Objectives:

At the end of the year the student is expected to:

- assess the families of infants and toddlers using family assessment checklist.

Procedure:

- the students are expected to make home visits and assess individual families
- submit the assessment report with planning the intervention programme of 2 cases of infants and toddlers

Paper IV: Individualised Early Intervention Programme (IEIP)

No. of hrs:200

No. of marks: 150

Objectives:

At the end of the year the student is expected to:

- carry out comprehensive assessment of the child and family and write the assessment

reports

- plan and implement individualised early intervention programme.
- Evaluation of the IEIP

Procedure:

- comprehensive assessment of child and family
- writing the assessment report and communicating assessment results to the family

- planning and implementing IEIP

- evaluating IEIP and documenting the results and presentation of cases

- submission of records of 4 cases

FORMAT FOR IMPARTING TRAINING

Theory classes

For imparting the training, theory classes will be conducted every day from Monday to Thursday from 2 to 5 pm. On Fridays there will be total of 7 lecture hours from 9 AM to 5 PM with one hour lunch break from 1 to 2 pm.

Practical classes

Practical classes will be conducted everyday from Monday to Thursday from 9 am to 1 pm (4 hours per day)

REFERENCES

Paper I

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2. Arthur C., Guyton (1987) Human Physiology and Mechanisms of disease, Fourth Ed., London; W.B.Saunders Co.
3. Frank I Menolascino, Jack A Stark (1988), Preventive and Curative intervention in Mental Retardation. Sydney: Brookes Publishing Co.
4. J.A.Fraser Roberts (1985), Introduction to Medical Genetics, ELBS/Oxford University Press.
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Paper II

As in Paper I above

Paper III

1. Appropriate curriculum and assessments for young children (pp. 128-136). Washington, DC: National Association for the Education of Young *Childre~*.
2. Serving Children from birth through age 8. Washington, DC: National Association for the Education of Young Children.
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Paper-IV

Physiotherapy:

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Speech therapy References:

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Occupational therapy References:

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Paper V

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