



BIOLOGY 4291 - COMMUNITY

HEALTHCARE: FROM THEORY TO PRACTICE

SPRING 2022 - Tuesday's 5:15 – 6:30 pm
Shannon Clinic Harris Conference room

COURSE NUMBER
BIO4291

COURSE TITLE
Community HealthCare: From Theory to Practice

CREDITS
Two Semester Credit Hours [2-0-0]

Instructors: Dr. Russell Wilke (In-college coordinator), Dr. Chris Barnett (Course Director), Amber Longoria (Course Instructor) and a team of health professionals*.

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Amber Longoria Mon & Wed 9am to noon, or by appointment

COURSE DESCRIPTION - A study of key issues concerning community health care aimed at developing practical approaches to supporting patients. Students consider obstacles to effective health care as well as strategies for enabling at-risk patients to play more active roles in promoting their health and well-being. Topics include: challenges of delivering adequate healthcare in communities; population medicine; specific problems posed by diabetes, obesity and cardiovascular disease; ethical dimensions of the concept of “underinsurance”; community medicine and the law; and methods of improving compliance and measuring outcomes. Conducted as a seminar, this course provides students with the academic foundation for a subsequent Health Coach Internship with Shannon Medical Center.

More specifically, concise presentations in class set the stage for interactive thought-provoking group discussions designed to achieve heightened conceptual and practical understanding of the issues. The process of exploring identified healthcare challenges/opportunities is intended to prepare students for effectively serving as health coaches in the community. Once a fundamental grasp of the core material is established, case presentations (actual de-identified patient scenarios), designed to evoke creative team-based strategies and solutions, will be utilized to prepare each student for the subsequent Health Coach internship offered the following semester.

Students will develop a comprehensive series of bio-psycho-social insights for promoting positive health behaviors, enabling patients to move past their perceived obstacles and boosting overall adherence. During the subsequent internship, student coaches will be assigned to either provide in-home visits or phone interactions.

Health coaches will become engaged in the processes of educating and motivating identified *at risk* patients to take an active and meaningful role in their health and well-being. Interdisciplinary weekly coaching



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meetings will be scheduled for case presentations and discussions with Shannon healthcare professionals who will also be available on-call if any question or need arises.

THE WIDER PERSPECTIVE - In this challenging era of healthcare reform, innovative collaborative strategies are required to meet the health needs of our communities. Berwick's *Triple Aim* – improving population health and the patient experience while diminishing per capita cost – serves as a worthy goal for community-based initiatives.

Despite our nation's number one position in the world for spending the highest percentage of GDP on healthcare, America remains far behind in the World Health Organization's overall ranking of health systems. The US is presently ranked 37th, falling immediately behind Dominica and Costa Rica.

While reforming payment methodologies and incentives are undoubtedly necessary, rational cost-effective strategies for reducing care gaps and modifiable risk factors in *at risk* individuals are likely to yield the greatest incremental benefits. According to recent reports, 5% of the population utilizes 49% of all healthcare resources (and 10% utilizes 64%).

The development of an effective healthcare system requires a comprehensive coordinated patient-centric strategy developed through a centralized ongoing total quality improvement process. Emphasis must be placed on manageable risk factors in individuals with chronic conditions such as coronary vascular disease, heart failure, hypertension, diabetes, chronic obstructive lung disease and for the frail elderly. In addition, cost-effective strategies must be developed and tested for early detection; appropriate treatment and reduced hospitalization need for individuals with ambulatory care sensitive conditions (ACSCs). With improved preventive healthcare or condition management, the risk of an acute event and/or subsequent hospitalization can be reduced. According to the Agency for Healthcare Research and Quality (AHRQ), "While not all admissions for these conditions are avoidable, it is assumed that appropriate ambulatory care could prevent the onset of this type of illness or condition, control an acute episodic illness or condition, or manage a chronic disease or condition."

This innovative course, led by an interdisciplinary team of health professionals, focuses on the medical, psychosocial, behavioral and economic challenges/opportunities that exist within our rapidly evolving healthcare system. The faculty includes physicians as well as representatives of Shannon Medical Center's administration, nursing, social work, nutrition and legal staff.

With the objective of developing an integrative healthcare/education partnership for our community, the fundamental aim of the program is to demonstrate positive local impact by students who successfully complete this course and subsequently provide healthcare coaching services (under direct health professional supervision) to identified individuals in our community.

LEARNING OBJECTIVES - Upon completion of this course, students will be prepared to:

- Explain key concepts related to specific medical conditions, psychosocial, behavioral and economic factors that impact the continuum of health care at the community level.
- Discuss a series of evidence-based strategies for optimizing the healthcare outcomes and patient experiences of individuals with manageable risk factors and ambulatory care sensitive conditions.
- Integrate a comprehensive series of bio-psycho-social insights into strategies for promoting positive self-health behaviors
- Work with an interdisciplinary team of health professionals that identifies/assesses adherence obstacles and care gaps, and provides suggestions/support for improving care coordination.
- Be prepared to serve as health coaches within an interdisciplinary care coordination healthcare team.



COURSE MATERIALS

- Assignments for each class will include articles that appear in medical journals or in the lay press or websites and videos. Reading assignments can be found in the content folder on Blackboard.
- Handouts will be provided in accordance with specific assignments.

COURSE REQUIREMENTS - This course is designed for pre-health students as well as others whose career goals are focused on community/healthcare service. Each student is expected to agree to undertake at least two subsequent internship semesters (2 credits each semester) with Shannon Care Coordination Program (SCC) under the direction of Dr. Chris Barnett and Dr. Russell Wilke in the fall and spring semester. Prior to seeing any patient in the subsequent semester students are required to turn in designated immunizations, undergo background check and drug screening. Additional screening criteria may be added at the discretion of the program directors.

Adequate preparation is expected for each class. Requirements include: completing assigned reading; making meaningful contributions to discussion forums; participation in all interactive discussions; a passing grade on both the mid-term and final exam.

GRADING SYSTEM

Course grades will be dependent upon completing course requirements and meeting the student learning outcomes.

The following grading scale is in use for this course:

- A = 90-100 percent
- B = 80-89 percent
- C = 70-79 percent
- F = <70 percent

EVALUATION AND GRADES

Attendance/In-Class Participation	20%
Online Discussion Board Participation	20%
Mid-term Group Project	30%
Final	30%
TOTAL:	100%

MID TERM [Due March 8 at 5:15pm]

There will be a midterm group activity designed for students to work as a team to create innovative strategies to address the issues presented in the case example. The midterm is to be written in **Times New Roman, 12pt font, one-inch margins, and follow basic APA (American Psychology Association) style guidelines (no abstract needed)**. If you are not familiar with APA, it is your responsibility to learn the details. Include a title page which will include student names, course information, and due date. The Mid-Term is a collaborative activity in which students will be put in groups in order to create/ present their strategies to the case example.

FINAL [Rough draft due May 8 by 11:30pm, in class presentations May 10] The final includes working with an assigned team to create a plan for a fictional patient based on the information learned throughout this class. The final involves in class group work for the final presentation, a rough draft of the presentation and supporting documents are to be submitted no later than 11:30pm on May 8. Each



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group will then give a formal presentation outlining their patient and the plan they created for their patient during the May 10 class. More instructions will be given in class on April 26.

DISCUSSION FORUMS - In addition to the expectations for class participation outlined below, active engagement with the course will involve regular and thoughtful contributions in-class and to the discussion forums on Blackboard. These will be created in connection with designated topics and will provide opportunities for students to submit questions, comments, and responses regarding the readings and/or other student postings. These forums will be used to help structure our class discussions and to provide a free space for the spirited, but courteous, exchange of ideas.

Discussion Forums will open on Wednesdays at 8am and will address the topic for the following week's class. Posts should be made no later than 11:59pm on Monday's (the day before class)- you will not get credit for any post after that time. Discussion board posts are expected to be written throughout the week not just the day before class. **In order to get full credit- each week your first post must be before Noon on Friday. Please review the discussion board grading rubric and netiquette for additional information on grading.**

CLASS PARTICIPATION - The success of this course depends in large measure on the level of student engagement. We define class participation as a sincere effort to contribute positively to our collective educational experience. Above all, this means involving yourself intellectually and actively in class discussion and activities. Your level and quality of involvement will determine your participation grade for the course. Examples of positive class participation include good and prompt attendance, respectful interaction with others, a demonstrated familiarity with the readings, and thoughtful comments made during discussions. Class participation may also include in-class and out-of-class assignments that are to be completed within a reasonable timeframe. Please consult your instructor for more information.

ATTENDANCE - Attendance is mandatory. You must be on time for all classes and attend for the full class meeting in order to receive credit for attendance. If you are late (tardy) even just a few minutes or miss class for a non-university sanctioned event, your grade will be lowered by one full-letter grade for each absence or "tardy." More than 3 absences/tardies will result in your dismissal from the program and an "F" in the course. Sanctioned university events, must be brought to our attention with documentation at least 2 weeks prior to the class meeting.

Failure to submit paperwork, participate in class discussions or other assignments on time will also result in the lowering of your grade by one full-letter grade for each incident. More than 3 late submissions will result in your dismissal from the program. Continuance to part 2 depends on your performance in part 1.

The Health Professions Advisory Committee (HPAC) will incorporate any problems with attendance, tardiness, or assignments into your Health Professions Evaluation (HPE) upon your application to health professions schools. If you anticipate a problem, please contact us before the end of the first week of classes. This is how the real world operates and we expect you to conduct yourself with the highest levels of professionalism and respect.



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Excessive absences will be reported to the registrar's office and could affect your financial aid. You are required to be in class every day and are responsible for all information given. ASU requires that attendance be checked at each class meeting. Attendance will be taken in a number of different ways.

BLACKBOARD - The class Blackboard site is an important place for information, communication, and our discussion forums. All information about assignments, grading criteria, and anything else related to the course will be posted there. The site will also be the main route by which we communicate out-of-class announcements to you. It will also serve as the location for our discussion forums. Please make sure you learn to navigate our Blackboard Site effectively as soon as possible, and ensure you check it on a regular basis. If you are not familiar with blackboard and the discussion board please contact Amber Longoria for assistance by phone or email.

BROWSER COMPATIBILITY CHECK

It is the student's responsibility to ensure that the browser used to access course material on his/her computer is compatible with ASU's Blackboard Learning System. The faculty reserves the right to deny additional access to course assignments lost due to compatibility issues. Students are responsible for reviewing the guidelines posted in this course regarding accessing Blackboard assignments. Problems in this area need to be discussed with faculty at the time of occurrence, either via a phone call (preferred) during posted acceptable hours for calling, or via email notification during times outside those posted for calls. Be sure to perform a browser test. Select the "**Support**" tab from the Blackboard homepage (<http://www.blackboard.angelo.edu>) Select "**Test your Browser**" option

ACADEMIC INTEGRITY - Angelo State University expects its students to maintain complete honesty and integrity in their academic pursuits. Students are responsible for understanding the Academic Honor Code, which is contained in both print and web versions of the Student Handbook.

ACADEMIC HONESTY

Academic honesty is expected on all work. Students are expected to maintain complete honesty and integrity in their learning experiences. Any student found guilty of any form of dishonesty in academic work is subject to disciplinary action and possible expulsion from ASU.

The Biology Department adheres to the academic honesty statement as set forth in the Angelo State University Student Handbook (2011-2012) http://www.angelo.edu/forms/pdf/Honor_Code.pdf. The University "faculty expects all students to engage in all academic pursuits in a manner that is above reproach and to maintain complete honesty and integrity in the academic experience both in and out of the classroom setting and may initiate disciplinary proceedings against a student accused of any form of academic dishonesty, including but not limited to, cheating on an examination or other academic work, plagiarism, collusion, and the abuse of resource materials."

PLAGIARISM

Plagiarism at ASU is a serious topic. The Angelo State University's Honor Code gives specific details on plagiarism and what it encompasses. Plagiarism is the action or practice of taking someone else's work, idea, etc., and passing it off as one's own. Plagiarism is literary theft. In your discussions and/or your papers, it is unacceptable to copy word for word without quotation marks and the source of the quotation. We use APA format as a guide for all writing assignments. Quotes should be used sparingly. It is expected that you will summarize or paraphrase ideas giving appropriate credit to [all] source[s] both in written assignments and



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comments posted online [as appropriate]. Resources to help you understand this policy better are available at the ASU Writing Center

http://www.angelo.edu/dept/writing_center/academic_honesty.php.

AMERICAN DISABILITY ACT - Persons with disabilities which may warrant academic accommodations must contact the Student Life Office, Room 112 University Center, in order to request and to implement academic accommodations.

STUDENTS WITH DISABILITIES

1. "Angelo State University is committed to the principle that no qualified individual with a disability shall, on the basis of disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of the university, or be subjected to discrimination by the university, as provided by the Americans with Disabilities Act of 1990 (ADA), the Americans with Disabilities Act Amendments Act of 2008 (ADAAA), and subsequent legislation."

2. "Student Contact: The Student Life Office is the designated campus department charged with the responsibility of reviewing and authorizing requests for reasonable accommodations based on a disability, and it is the student's responsibility to initiate such a request by contacting the Student Life Office, Room 112 University Center, at (325) 942-2191 or (325) 942-2126 (TDD/FAX) or by email at Student.Life@angelo.edu to begin the process."

Reasonable accommodations will be made for students determined to be disabled or who have documented disabilities.

INCOMPLETE GRADE POLICY (OP 10.11 Grading Procedures)

It is policy that incomplete grades be reserved for student illness or personal misfortune. Please contact faculty if you have serious illness or a personal misfortune that would keep you from completing course work. Documentation may be required.

STUDENT ABSENCE FOR OBSERVANCE OF RELIGIOUS HOLY DAYS

1. "A student who intends to observe a religious holy day should make that intention known in writing to the instructor prior to the absence." Please see ASU Operating Policy 10.19.

COPYRIGHT POLICY

Students officially enrolled in this course should make only one printed copy of the given articles and/or chapters. You are expressly prohibited from distributing or reproducing any portion of course readings in printed or electronic form without written permission from the copyright holders or publishers.

SYLLABUS CHANGES

The faculty reserves the option to make changes as necessary to this syllabus and the course content. If changes become necessary during this course, the faculty will notify students of such changes by email, course announcements and/or via a discussion board announcement. It is the student's responsibility to look for such communications about the course on a daily basis

IMPORTANT FINAL NOTE

We will be proceeding on the assumption that you are genuinely interested in this subject, that you aim to learn as much as possible, and that you are prepared to put the necessary time and effort into achieving true learning. We want to help you as much as possible in your endeavors, so please let us know if there is anything more we can be doing in this regard. In particular, if at any time you feel you



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are losing ground, losing your way, or experiencing any undue problems related to the course, please don't hesitate to come and see us, and as early as possible. We are always glad to try and help, and the sooner we address problems the better.



SPRING 2022 TENTATIVE CLASS SCHEDULE

DATE	CLASS THEME	Assignments and notes
WEEK 1 –1/18	Orientation- introductions/ icebreakers-	Discussion board opens 0800 All reading material available in the “course documents” folder on blackboard Required text: “Galea, S. (2021). <i>Well: What we need to talk about when we talk about health</i> . OXFORD UNIV PRESS US.
WEEK 2 – 1/25	The Need for Change: healthcare delivery challenges in the community – <i>Shane Plymell</i>	Book Overview
WEEK 3 – 2/1	Health Coaching Overview: an evolving healthcare strategy – <i>Dr. Barnett</i>	Lessons learned from a pandemic related to population health. Ch. 1 The past Ch. 2 Money
WEEK 4- 2/8	The Role of the Health Coach in the Community: becoming a change agent – <i>Amber Longoria</i>	Ch. 3 Power Ch 4 Politics
WEEK 5 – 2/15	Population Medicine: prevention and manageable risk factors/ Quality and the patient experience- <i>Holly Lopez</i>	Ch 5 Place Ch 6 People
WEEK 6 – 2/22	Case Management and Resource Utilization – <i>Christina Zitting</i>	Ch. 7 Love and Hate Ch. 8 Compassion Assign midterm- Due 3/8 at 5:15pm
WEEK 7 –3/1	Challenges for the Uninsured and the Underinsured: ethical questions – <i>Panel discussion: JT Tucker, Karen Jansa, Dr. Brewer</i>	Provide case study that highlights most common ethical concerns including HIPAA; bullet points to address Ch. 9 Knowledge Ch. 10 Humility
WEEK 8- 3/8	Cardiovascular vascular disease, strokes and congestive heart failure – <i>Dr. Karumbaiah</i>	Ch. 11 Freedom Midterm due by 5:15pm
WEEK 9- 3/15	SPRING BREAK	Discussion board will open at 0800 on 3/4 and stay open until 11:59pm on Monday March 21st.



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WEEK 10- 3/22	Diabetes, Obesity and Metabolic Syndrome – Dr. C. Richeh	“What is diabetes- and medical treatments for diabetes” Ch. 12 Choice Ch. 13 Luck
WEEK 11 –3/29	Day to day management of diabetes – Dawn Stevenson Nutrition’s role in management of chronic illness. Carol Reyes RD	In class hands on lab “ A day in the life of chronic illness” Ch. 14 The Many Ch. 15 The Few
WEEK 12 – 4/5	Chronic conditions in the respiratory system- COPD, sleep apnea and Asthma – TBD	Ch. 16 The public good Ch. 17 Fairness and Justice
WEEK 13- 4/12	Overview of the Primary care Physicians role – Dr. Goen Chronic disease of the kidney/ dialysis- Nancy Smith	Dr. Goen- address challenges with medication compliance; costs, complex directions, health literacy impact on prescribing; effects of non- adherence to medications. Ch. 18 Pain and Pleasure
WEEK 14 – 4/19	The Role of Hospice and Palliative Care in Care Coordination – Dr. Hitchcock	Ch. 19 Death Ch. 20 Values
WEEK 15 – 4/26	Building a Working Alliance: the health coach patient relationship – Amber Longoria	Overall book discussion
WEEK 16 – 5/3	Final exam- in class work	No reading- course material review and evaluation on discussion board Presentation rough draft due 5/8 by 11:30pm
WEEK17—5/10 FINALS	Final exam- presentations	

***Health Care Professionals in order of appearance**

- **Shane Plymell MBA, CPA** is the President/Chief Executive Officer at Shannon Medical Center
- **Chris Barnett, MD** Chief Medical Officer at Shannon Medical Center
- **Amber Longoria, NP-C**, is the Shannon Care Coordination program manager
- **Holly Lopez, M.S.** is the Assistant Vice President, Quality Resources at Shannon
- **Christina Zitting, MSN, RN, CCM** is the Director of Case Management at Shannon Medical Center
- **Kirk Brewer, MD** is a hospitalist at Shannon Medical Center
- **JT Tucker**, is a pastoral care assistant at Shannon medical Center
- **Karen Jansa LCSW, CCM** is the manager of Social Work for Shannon Medical Center
- **Keerthana Karumbaiah, MD**, is board certified in Internal medicine, cardiology and nuclear cardiology
- **Chadi Richeh, M.D.** is an Endocrinologist and board certified in Internal medicine at Shannon Clinic
- **Dawn Stevenson RNC, CDE** is a Certified Diabetic Educator and is the Diabetes Management Coordinator for Shannon Medical Center
- **Carol Reyes, RD** is a registered dietitian at Shannon
- **Kristin Goen, MD** is board certified in Family Practice at Shannon Clinic
- **Nancy Smith, RN, FNP** is a Nurse Practitioner at Shannon Clinic Nephrology department
- **Dr. Linda Hitchcock, MD** is a board certified Family physician who is also board certified in Geriatric medicine, hospice and palliative care



Discussion Board “Netiquette”

Online discussion presents a unique learning environment in which students interact with one another in order to explore different views and opinions. This format also is unique in that the only source of communication is thru written communication. It is because of the latter that we must outline good “netiquette” defined as the code of behavior for discussion board communication.

Ground Rules for online discussion:

- Check the discussion board frequently and respond appropriately and on subject.
- Do the appropriate preparation. Complete reading and lesson activities before you join the discussion.
- Focus on one subject per message and use pertinent subject titles
- Keep your messages short and brief – one to two paragraphs is adequate. Postings should be free of misspellings and grammatical errors, read it out loud before posting to catch errors.
- Take time to organize your thoughts before posting. Provide only the most essential information in your post. If people want further details, they’ll ask for them in a reply.
- Avoid discussion posts that offer little more than “I agree.” Each discussion posting should offer some new content or ask new questions, aimed to foster continued exploration of the topic.
- When replying to a message, please use the same “subject” line so that people will find it easy to follow the “thread” of a topic. Once you read the discussion topic, please post your ideas using “Reply” button.
- Read all posts in the thread before replying. This will prevent repeating the same thoughts/ideas. Acknowledge the points that you agree with and suggest alternative views to those you disagree with.
- Respect others’ ideas and opinions. Feel free to disagree, but express your disagreement in a respectful manner.
- Do not use linguistic shortcuts i.e. cu or l8r’s. If you use an abbreviation, you must first write out the meaning and include the abbreviation that will be used. Example: Congestive heart failure (CHF). The patient had CHF.
- It is fine to use humor, but use it carefully. The absence of face-to-face cues can cause humor to be misinterpreted as criticism or flaming (angry, antagonistic criticism). Feel free to use emoticons such as ☺ or ;) to let others know you are being humorous.
- Cite your sources! If you use intellectual property of another person (authored material) you must give them credit using APA format. Examples: books, magazine, research articles, online journals, or blogs. (The only exception is for the week’s assigned article but you must include information that you are referencing that particular article.)
- **NO YELLING!** Do not write with caps lock on, it is considered yelling and is difficult to read.
- **Do not wait until the last minute to post your opinion.**

****Remember written language is the only way we are communicating; be mindful that your post must be clearly written in order to convey your intended message. ****



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	Does Not Meet Expectations (60 points)	Meets Expectations (80 points)	Exceeds Expectations (100 points)
Quantitative	A lurker reads messages in the group discussion forums on a weekly or more frequent basis but only posts once. Failure to make at least 1 post in a week will result in a 0.	Accesses group discussion forums at least three times each week. Reads messages. Posts at least 2- 3 constructive messages each week in group forums. Posts all on the same day or does not post by noon on Friday.	Accesses and posts to group discussion forums several times each week. Reads all messages. Posts 4 or more constructive messages each week on different days during the week. First post submitted by noon on Friday.
Content	Messages tend to address peripheral issues and/or ramble. Content is generally accurate, but with omissions and/or errors. Tendency to recite fact or make general statements without further discussion- such as good job, I agree etc.	Messages tend to provide good general answers but may not always directly address discussion topics. Assertions are not always supported by evidence. Avoids unsupported opinions.	Messages are characterized by conciseness, clarity of argument, depth of insight into theoretical issues, originality of treatment, relevancy, and sometimes include unusual insights.
Questions	Rarely includes questions that promote discussion. Rarely responds to questions.	Sometimes includes questions that stimulate discussion. Sometimes responds to questions raised by others.	Often includes good questions that stimulate discussion. Frequently responds to questions from others.
Collaboration	Shows little evidence of collaborative learning. Most comments are directed to the instructor.	Collaborative learning is evidenced by comments directed primarily student-to-student rather than student-to-instructor. Evidence of support and encouragement is exchanged between students, as well as willingness to critically evaluate the work of others with constructive comments.	
Tone	Student demonstrates inappropriate behavior. May be aggressive or disrespectful, does not demonstrate concern, sensitivity, and kindness or loses control.	Members are empathic rather than aggressive. Postings and e-mail reveal the ability of students to conduct themselves appropriately in professional relationships by manifesting such qualities as sociability, sensitivity, discernment, concern, kindness, and gentleness. Self-control is also demonstrated in qualities that would include respectfulness, flexibility, temperateness, discreteness, humbleness, forgiveness, and confidence.	
Mechanics	Some messages contain numerous errors in spelling and grammar. Sources are not cited.	Messages contain few if any errors in spelling and/or grammar (indicating proofreading). Messages are well-formatted with spacing and are easy to read.	

[Rovai, A. \(2007\). Facilitating Online Discussions Effectively. *The Internet and Higher Education*, 10\(1\), 77-88.](#)