

University of Lethbridge



FACULTY OF HEALTH SCIENCES
PUBH 1000Y – INTRODUCTION TO PUBLIC HEALTH
Course Syllabus – Fall 2016
Calgary Campus Section Y: Thursdays, 1800-2050; Room S6031A

INSTRUCTOR: Tammy Troute-Wood, MN RN
tammy.troutewood@uleth.ca

OFFICE HOURS: Thursdays, 2100-2200 & by appointment

PREREQUISITES/CO-REQUISITES/EQUIVALENTS: none

COURSE DESCRIPTION:

This course is an introduction to the key concepts and practices of public health – the art and science of preventing disease, prolonging life, and promoting health through the organized efforts of society. The health of populations will be explored as an evolving and multidimensional concept, shaped through historical, cultural, psychosocial, economic, and environmental contexts. Goals, interdisciplinary roles, challenges, and settings for public health practice will be explored; and intervention strategies and tools for improving population health introduced.

Special thanks to Ali Walker MPH, BScN, RN for permission to adapt course materials.

LEARNING OBJECTIVES:

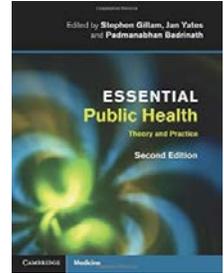
1. Define public health and identify various professions, disciplines, organizations, and delivery systems within the field of public health
2. Identify key concepts and strategies of health protection, health promotion, and health policy
3. Apply foundational principles of demography and epidemiology as they relate to public health practice and diverse populations
4. Discuss how inequity and the social determinants influence population health
5. Describe key interventions and approaches used to improve population health

RESOURCES and READINGS:

There is no required textbook for this course. Required readings will be listed on the course syllabus and accessed electronically. Additional required readings may be assigned throughout the course of the semester at the discretion of the instructor. **Students are expected to be familiar with the required readings, and to incorporate them into assignments and discussions.**

The following textbook is **strongly recommended** for students who are interested in having a resource that covers many of the concepts and provides a solid introduction to principles of public health.

- Gillam, S., Yates, J., and Badrinath, P., (2012). *Essential public health: Theory and practice (2nd ed.)*. New York: Cambridge University Press. ISBN-13: 978-1107601765



COURSE FORMAT:

The course will consist of one 3-hour class per week, required readings and assignments. Teaching strategies will use a variety of methods (e.g., instructor and guest presentations, use of multi-media, readings, Socratic seminars, debates, group work and individual assignments) to facilitate learning outcomes and promote critical thinking and the acquisition of knowledge for a diverse student audience.

Students will need to bring their own individual electronic device **for in-class use** (e.g. smart phone, tablet, iPad, laptop, etc.), to access the internet and complete in-class assignments.

(<https://www.uleth.ca/ross/courses/pubh>)

METHOD OF ASSESSMENT:

ASSIGNMENT	VALUE	DUE DATE* Subject to change
Participation/Engagement <ul style="list-style-type: none"> Participation and in-class assignments (instructor evaluation) 2 self-assessment activities 	20% 5%	Ongoing Mid-point/end of the semester
Exams <ul style="list-style-type: none"> Midterm Final 	20% 20%	October 20 December 15
Written Public Health Briefs (individual) <ul style="list-style-type: none"> 2 required 	10% 10%	October 6 November 24
Public Health Brief Visual (group) <ul style="list-style-type: none"> Group project 	15%	December 1
TOTAL	100%	

EVALUATION AND DESCRIPTION OF ASSIGNMENTS:

Participation and in-class assignments (20%) (Instructor evaluation)

Students are expected to attend all classes and come prepared to participate in learning. Required readings are to be completed before class. Marks will be awarded based on respectful student participation during the class and assigned activities. There will be approximately 8-10 in-class activities, which will not always be announced beforehand. Most activities will be assigned and completed in groups during class time, but a few may require advance preparation and/or post-class follow-up in order to obtain full credit. At the end of the semester, the lowest mark on a single in-class activity will be dropped (i.e. a student may miss ONE in-class activity per semester without penalty to their overall participation and engagement mark).

Self-Assessment Activity (5%)

Students will complete two self-assessments (2.5% each) and reflect on their own participation and engagement during class. The self-assessment activities will be done in-class at the mid-point and end of the semester.

Students will:

- Attend class and be free of distractions (e.g, texting, playing on computer, etc).
- Be prepared and organized
- Demonstrate effective verbal communication in a clear, confident and inclusive way
- Add something unique based from their perspective while accurately integrating course content
- Listen, engage and build upon discussions of others
- Provide feedback and encourage others
- Contribute to small group work in meaningful and equitable ways
- Submit the in-class assignment(s) to the instructor by the end of the class
- Demonstrate respect for your peers, instructors, and guests by adhering to the following classroom guidelines:
 - ✓ Everyone is responsible for their own learning
 - ✓ Everyone has the right to their own beliefs and opinions
 - ✓ Everyone has the right to be listened to
 - ✓ Everyone has the right to confidentiality
 - ✓ Everyone has the right to participate

See grading criteria for participation/engagement in Appendix A.

Examinations (40%)

Both exams are cumulative. Questions may be taken from required readings, presentations and class discussions. The exam format will be multiple-choice and short answer essay responses.

Public Health Briefs (20%)

These assignments consist of two written briefs (10% each) which are short academic papers of approximately 1000 words. In these briefs, students will *consider the broader public health concepts discussed in class within the context of a specific public health issue from a Canadian perspective.*

At the beginning of the semester, each student will select one public health issue/topic from a list provided by the instructor. This issue or topic will be the focus for both individual written briefs and for the group visual brief (see below).

Each written brief will demonstrate understanding of course content by using the selected health topic as the primary focus. There will be three content options but **students are only required to complete two written public health briefs**. Individual students may decide which two options they will focus on and which one they will omit.

Written briefs will provide students with an opportunity to improve their academic and concise writing skills; find, incorporate, and apply relevant scholarly literature; become familiar with APA formatting style, demonstrate critical thought; and effectively express key messages/ ideas through written communication. Most importantly, students will gain a deeper understanding of a particular public health issue in Canada.

Written Brief Instructions (individual assignments)

Options	Written Brief Instructions (Individual) (choose 2 from below)
1	Using the definition of public health, frame your selected health issue or topic as a public health issue in Canada and describe it in epidemiologic terms by person, place, and time. Consider diversity in populations.
2	Describe how the Social Determinants of Health (SDOH) and life course perspective relate to your selected issue or topic. Consider diversity in populations
3	Outline the influence or effects of policy (actual or potential) and strategies of health promotion and health protection for addressing your selected public health issue or topic. Consider diversity in populations.

See grading criteria for written public health briefs in Appendix B.

Visual Brief (group presentation): The visual brief is a mandatory assignment (not optional).

The visual public health brief is a group project in which students who have selected the same health issue/topic will bring together their knowledge of the issue and **must present all three content areas** outlined in the individual written briefs.

The group will collaborate to create a concise visual representation of their topic from a public health perspective and effectively present key information to the class.

Much of the preparation for this assignment will be done individually through the completion of the written briefs and in in-class assignments. The final product for presentation will require group collaboration, and should demonstrate the collective efforts of all group members (a peer evaluation will be part of the final marking scheme for this assignment).

See grading criteria for visual public health brief in Appendix C.

CLASSROOM ETIQUETTE & LATE ASSIGNMENTS:

Students are expected to attend all classes, arrive on time, and stay for the duration of class, unless prior arrangements have been made. Turn cell phones to vibrate and refrain from using electronic devices unless it is related to course work/activities.

Students will adhere to professional standards for all electronic communications. For example, emails should be respectful, have a greeting, full sentences, and a salutation. Please specify the nature of your email in the subject line. **Emails will be responded to as quickly as possible, typically within 48 hours. Only urgent emails should be red-flagged.**

Instructor communication will occur through students' **uleth.ca** email accounts (hint: forward this email to any other personal email accounts that you may be using).

Assignments must be submitted on time and in the format outlined (unless prior arrangements have been made). Late assignments will be deducted 10% per day up to a total of five days. After that, assignments will not be accepted for grading. Assignments not submitted in the format outlined by the instructor (e.g. hard copy, Turnitin, Moodle, etc.) will not be graded unless prior arrangements have been made.

GRADING BREAKDOWN: The grading scale for this course is consistent with that established in the Faculty of Health Sciences, effective May, 2002.

Letter	GPA	Percent	Letter	GPA	Percent
A+	4.0	95 - 100%	C+	2.3	71 - 74.9%
A	4.0	91 - 94.9%	C	2.0	67 - 70.9%
A-	3.7	87 - 90.9%	C-	1.7	63 - 66.9%
B+	3.3	83 - 86.9%	D+	1.3	59 - 62.9%
B	3.0	79 - 82.9%	D	1.0	55 - 58.9%
B-	2.7	75 - 78.9%	F	0	0 - 54.9%

PLAGIARISM STATEMENT:

The University of Lethbridge subscribes to Turnitin.com, a plagiarism detection service. Please be advised that student work submitted for credit in this course may be submitted to this system to verify its originality. Students must be able to submit both electronic and hard copy versions of their work upon request.

ACCOMMODATIONS FOR STUDENTS WITH A DISABILITY:

Reasonable accommodations are available for students who have a documented disability. If you have been diagnosed with a disability, there is no need to face the challenge of University without support. Please contact the Accommodated Learning Centre to set up an appointment at 403-329-2766 <http://www.uleth.ca/ross/counselling/index.html>. After registering with the Accommodated Learning Centre, your instructor will be notified by a formal letter of any accommodations you require. In addition, students are responsible for requesting accommodations from the instructor at least ***two weeks*** in advance of the evaluation date. The instructor and student are jointly responsible for arranging the resources needed for the evaluation process.

COPYRIGHT STATEMENT:

All University of Lethbridge students, faculty and staff must comply with Canadian law and institutional license agreements pertaining to copyright. At the same time, keeping abreast of our copyright obligations and options is a complex task as copyright matters locally and globally are in flux and are likely to remain so for at least the near future.

The University's Copyright website (www.uleth.ca/copyright) is a source of current copyright information that includes:

- answers to common copyright questions (see the [FAQs](#)),
- guidance on whether you need permission or a license to copy a particular work (see the [Copyright Permissions Flow Chart](#)),
- guidance on assessing whether fair dealing may apply to specific instances of copying you wish to undertake (see the [Guidelines for Copying under Fair Dealing](#)), and
- a [permissions look-up tool](#) to help you determine the kinds of copying and other uses permitted by the Library's license agreements covering specific online journals and other online resources.

You are encouraged to contact the University Copyright Advisor (copyright@uleth.ca) for assistance with any copyright questions or issues.

COURSE POLICIES

1. **Prerequisites:** It is the responsibility of students to check the prerequisites for courses before registration. If students are found to be registered in a course for which they do not have the prerequisites and they have not received prior permission from the appropriate program chair, they can be de-registered. If this occurs after the add/drop date, tuition will not be refunded.
 2. **Mid-term Examinations and Quizzes:** Alternative arrangements for writing a missed midterm examination or quiz may be made at the discretion of the instructor. Deferrals may only be granted in extenuating circumstances beyond the student's control.
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3. **Final Examinations:** Students who fail to write final examinations must provide satisfactory evidence of illness or extenuating circumstances AND must have the approval of the Dean for a makeup exam. Work commitments, holidays or traffic are not considered legitimate reasons for missing an exam. For unsubstantiated missed final exams that are not approved for makeup by a Dean, a grade of F (0 marks) will be given.

Deferred final exams can only be written at times set by the school and instructor. Please note that if a final exam deferral is granted, the date will be set by the instructor and department. Students who fail to write a deferred final examination must provide satisfactory evidence of illness or extenuating circumstances AND must have the approval of the Dean for a makeup exam. Work commitments, holidays or traffic are not considered legitimate reasons for missing an exam. For missed deferred exams, a grade of F (0 marks) will be given.

4. **Conduct of Examinations:** The instructor may articulate regulations for late entry to and early exit from the examination room. Instructors may also prescribe or restrict materials that may be used during the exam. No material aids including such items as: mobile phones, computers, or other digital devices, may be brought into the examination site without prior approval from the instructor. Please see additional examination policies in the 2016/2017 University Calendar, pages 82-83 (www.uleth.ca/ross/sites/ross/files/imported/academic-calendar/2016-17/part04.pdf).
5. **Academic Dishonesty and Plagiarism:** Academic Dishonesty and Plagiarism will not be tolerated and will automatically result in a zero grade for the submission. Any student caught plagiarizing may also be subject to additional University sanctions. The University of Lethbridge subscribes to an electronic plagiarism detection service. Students may be required to submit their written work in electronic form for plagiarism checking.
6. **Student Conduct:** The University's policies are described in the calendar and all students are expected to read, familiarize, and comply with them. Special care should be taken to understand the Student Discipline Policy for academic and non-academic offenses as listed in *part 4, sections 4 through 8 of the 2016/2017 Academic Calendar* (www.uleth.ca/ross/sites/ross/files/imported/academic-calendar/2016-17/part04.pdf).

Students will respect the basic standards of intellectual integrity, including, but not limited to refraining from plagiarism, cheating or duplicating someone else's work. In addition, students are expected to take an active role in encouraging other members of the academic community to refrain from academic dishonesty, and are asked to advise the instructor if they are aware of any such violations. This provision applies to any work submitted as a group project.

TENTATIVE CLASS SCHEDULE:

Recognizing that teaching excellence requires a degree of flexibility and responsiveness to both students' needs and emergent circumstances, adjustments to the course outline may be necessary and this schedule is subject to change.

DATE	TOPIC	PRE-CLASS READING
Week 1: September 8	Introduction to Public Health	<ol style="list-style-type: none"> Public Health Agency of Canada (2008). The Chief Public Health Officer's report on The State of Public Health in Canada 2008 (Chapter 2, Public Health in Canada). Available at: http://www.phac-aspc.gc.ca/cphorsphc-respcacsp/2008/fr-rc/cphorsphc-respcacsp05a-eng.php 12 Great Achievements (CPHA, 2010). Website. Available at: http://www.cpha.ca/en/programs/history/achievements.aspx This is Public Health: A Canadian History (CPHA, 2010). Available at: http://www.cpha.ca/en/programs/history/book.aspx
Week 2: September 15	Demography	<ol style="list-style-type: none"> Badrinath, P. & Gillam, S. (2011). Demography. In Gillam, S., Yates, J., & Badrinath, P. (Eds.), <i>Essential Public Health (2nd ed.)</i>. New York: Cambridge University Press. (Chapter 2, pp. 29-42). Available on Moodle. Leone, T.(2010). How can demography health inform health policy. Available on Moodle. A snap shot of health in Canada as demonstrated by top 10 lists (2011). Available at: https://secure.cihi.ca/free_products/Top10ReportEN-Web.pdf
Week 3: September 22	Epidemiology	<ol style="list-style-type: none"> Bonita, R., Beaglehoe, R., & Kjellstron, T. (2006). <i>Basic Epidemiology (2nd ed.)</i>. India: World Health Organization. (Chapter 1-3, select concepts). Available online at: http://whqlibdoc.who.int/publications/2006/9241547073_eng.pdf Centre for Disease Control (2011). Principles of epidemiology in public health. 3rd Ed. Review: Lesson one: Introduction to Public Health found at: http://www.cdc.gov/ophss/csels/dsepd/ss1978/
Week 4: September 29	Social Determinants of Health	<ol style="list-style-type: none"> Social Determinants of Health: The Canadian Facts. Available at: http://www.thecanadianfacts.org/The_Canadian_Facts.pdf World Health Organization (2003), Social Determinant of Health. Available at: http://www.euro.who.int/_data/assets/pdf_file/0005/98438/e81384.pdf
Week 5: October 6	Health Inequities	<ol style="list-style-type: none"> Nadoo, J., & Wills, J. (2011). Tackling Health Inequalities. In Naidoo, J., & Wills, J., <i>Developing Practice for Public Health and Health Promotion (3rd ed.)</i>. China: Elsevier. (Chapter 5). Available in Moodle. Kawachi, I., Subramanian, S.V., & Almeida-Filho, N. (2002). A glossary of Health Inequalities. <i>Journal of Epidemiology and Community Health</i> (56:647-652). Available electronically at: http://jech.bmj.com/content/56/9/647.full.pdf+html Canadian Institute for Health Information (2015). Report: Trends income related health inequalities in Canada. Available at: https://secure.cihi.ca/free_products/trends_in_income_related_inequalities_in_canada_2015_en.pdf
Week 6: October 13	Health and the Life Course	<ol style="list-style-type: none"> Public Health Agency of Canada (2009). Report: The State of Public Health in Canada 2009. The Role of Public Health in Influencing the Lifecourse Trajectory (Chapter 2). Available at: http://www.phac-aspc.gc.ca/cphorsphc-respcacsp/2009/fr-rc/cphorsphc-respcacsp05-eng.php Centre for Disease Control and Prevention (CDC). About adverse childhood experiences (ACES) (2016). Available at: https://www.cdc.gov/violenceprevention/cestudy/about_ace.html

DATE	TOPIC	PRE-CLASS READING
		3. Ben-Shlomo, Y., & Kuh, D. (2002). A life course approach to chronic disease epidemiology: conceptual models, empirical challenges, and interdisciplinary perspectives. <i>International Journal of Epidemiology</i> , 31 (285-293). Retrieved from: http://ije.oxfordjournals.org/content/31/2/285.full.pdf
Week 7: October 20	Midterm Exam	
Week 8: October 27	Approaches to Addressing Public Health	<ol style="list-style-type: none"> 1. Rose, G. (1985). Sick Individuals and Sick Populations. <i>International Journal of Epidemiology</i>, 14(pp. 32-38). Available electronically from http://ije.oxfordjournals.org/content/30/3/427.full.pdf 2. Frieden, T. R. (2010). A framework for Public Health Action: the Health Impact Pyramid. <i>American Journal of Public Health</i>, 100(4). Available at: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2836340/ 3. UOttawa (2015). Categories of Prevention. Webpage http://www.med.uottawa.ca/sim/data/Prevention_e.htm
Week 9: November 3	Health Promotion	<ol style="list-style-type: none"> 1. Public Health Agency of Canada. Ottawa Charter for Health Promotion. Available at: http://www.phac-aspc.gc.ca/ph-sp/docs/charter-chartre/index-eng.php 2. McKenzie, J. F., Nieger, B. L., and Thackeray, R. (2009). Planning, Implementing, and Evaluating Health Promotion Programs: A Primer. Theories and Models Commonly Used for Health Promotion (Book, Chapter 7 pp. 159-196). San Francisco, USA: Pearson Benjamin Cummings. Available on Moodle.
Week 10: November 10	Reading Week – No Class	
Week 11: November 17	Healthy Policy	<ol style="list-style-type: none"> 1. Adelaide Statement on Health in All Policies (2010). Available at: http://www.who.int/social_determinants/hiap_statement_who_safinal.pdf 2. National Collaborating Centre for Healthy Public Policy Website: http://www.ncchpp.ca/en/
Week 12: November 24	Health Protection	<ol style="list-style-type: none"> 1. Schnieder, MJ. (2011). Introduction to Public Health (3rd ed.). Sudbury, MA: Jones and Bartlett Publishers. A Clean Environment: The Basis of Public Health, Chapter 19, (pp. 333-347). Available on Moodle. 2. AHS Environmental Public Health Website. Available at: http://www.albertahealthservices.ca/eph.asp 3. Williams, L. M. (2013). Between Health and Place: Understanding the Built Environment. Available at: http://www.wellesleyinstitute.com/wp-content/uploads/2013/05/Between-Health-and-Place.pdf 4. Renalds, Smith, & Hale (2010). A Systematic Review of Built Environment and Health. <i>Family Community Health</i> 33(1), p. 68-78. Available at: https://wiki.rogfk.no/sandbox/groups/folkehelseogaland/wiki/cc147/attachments/55ba3/A%20Systematic%20Review%20of%20Built%20Environment%20and%20Health.pdf
Week 13: December 1	Visual Brief Presentations	
Week 14: December 15	Final Exam	

APPENDIX A

GRADING CRITERIA FOR PARTICIPATION/ENGAGEMENT:

Assessment	Criteria
0	<ul style="list-style-type: none"> ▪ Absent or extremely distracted (disengaged) ▪ Very disruptive to the learning environment ▪ Disrespectful to others
1	<ul style="list-style-type: none"> ▪ Present, not disruptive and respectful to others. ▪ Not prepared by completing required readings but open to learning ▪ Tries to respond when called on but does not offer much. ▪ Demonstrates very infrequent involvement in discussion and group work. ▪ Listens to others but infrequently provides feedback and encouragement
2	<ul style="list-style-type: none"> ▪ Present, not disruptive and respectful to others. ▪ Demonstrates adequate preparation but inconsistent with preparation and organization. Familiar with basic public health concepts, but does not show evidence of trying to synthesis them. ▪ Offers straightforward contribution to discussion (e.g., straight from the lectures or readings) without elaboration or very infrequently (perhaps once a class). ▪ Demonstrates sporadic involvement in discussion and group work.
3	<ul style="list-style-type: none"> ▪ Demonstrates good preparation and consistently organized. Knows concepts well, has thought through implications of them. ▪ Consistently contributes to discussion and accurately integrates public health concepts. ▪ Demonstrates consistent, ongoing involvement in- class discussion. ▪ Listens and responds thoughtfully to other students' comments. Provides feedback, questions in a constructive and respectful way and encourages others. ▪ Demonstrates consistent, active involvement and contributes to group work in meaningful and equitable ways.
4	<ul style="list-style-type: none"> ▪ Demonstrates excellent preparation and always organized. ▪ Offers analysis, synthesis, and evaluation of public health concepts (e.g., puts together pieces of the discussion by offering a unique perspective that take the class further in understanding). ▪ Listens and responds very thoughtfully to other students' comments. Provides feedback, questions in a constructive and respectful way and encourages others. ▪ Demonstrates ongoing very active involvement in discussion and group work. Takes a leadership role by organizing activities and actively supporting the learning of others.

APPENDIX B**GRADING CRITERIA FOR WRITTEN PUBLIC HEALTH BRIEFS:**

1. Was the completed assignment grammatically correct, and free of spelling and editing errors?	/10
2. Was APA format used consistently and correctly and was it within the word limit?	/10
3. Regardless of whether the grader agrees with the student's comments and conclusions, were thoughts expressed logically? Did the thoughts flow in an organized, logical way and the writing was clear and concise? Where the key messages easy to identify?	/10
4. Were the statements factually accurate and supported with scholarly literature where appropriate (minimum of three references per brief required)?	/10
5. Was the referenced literature appropriately integrated and were the sources cited considered to be credible to the body of public health literature?	/10
6. Did the student effectively incorporate concepts of public health from the course?	/10
7. Did the student incorporate public health terminology, define it and use these terms correctly? Did the student's writing demonstrate understanding of the course concepts?	/10
8. Was the topic appropriately framed from a Canadian perspective? (e.g. use of Canadian examples, statistics, organizational literature)	/10
9. Did the student's writing apply clearly and directly to their selected public health issue, and did it follow the instructions of the assigned brief?	/10
10. Were the ideas presented thoughtful and astute, or were they lacking in depth, insight, and critical thought? Was diversity in populations considered?	/10
TOTAL /100	

Scale for Each Criterion

- 10 Outstanding. Met or exceeded highest expectations.
- 9 Excellent, but minor improvements would have strengthened it.
- 8 Good. Meets the criterion, with no major deficiencies but room for improvement apparent.
- 7 Satisfactory. Fundamental requirements are met, but there is definite need for improvement.
- 6 Performance is marginal. There are major problems or omissions.
- 5 It is clearly deficient for this criterion. Substantial improvement is needed.
- 1-4 Varying degrees of "very poorly done."
- 0 Unaddressed/element omitted.
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APPENDIX C

GRADING CRITERIA FOR VISUAL PUBLIC HEALTH BRIEF:

Originality and creativity with quality in the visuals is demonstrated.	/10
Ideas are presented in a well-organized, concise manner	/10
The context of the information is both local and relevant (i.e. Canadian)	/10
The issue is framed from a public health perspective and the key messages are apparent and clear	/10
The brief demonstrates an understanding of the SDOH as they relate to the public health issue and diversity in populations was considered.	/10
The brief makes reference to potential and/or actual intervention strategies for addressing the issue	/10
Current events are incorporated in meaningful and relevant ways	/10
Information presented is appropriate and clearly rooted in scholarly evidence (i.e. factual). The content including, literature, art, pictures were referenced in APA.	/10
Individual group members attend and actively participate in the presentation. The brief is presented in an engaging way. The group members address questions and involve the audience in discussion.	/20
TOTAL /100	

Scale for Each Criterion

- 10 Outstanding. Met or exceeded highest expectations.
- 9 Excellent, but minor improvements would have strengthened it.
- 8 Good. Meets the criterion, with no major deficiencies but room for improvement apparent.
- 7 Satisfactory. Fundamental requirements are met, but there is definite need for improvement.
- 6 Performance is marginal. There are major problems or omissions.
- 5 It is clearly deficient for this criterion. Substantial improvement is needed.
- 1-4 Varying degrees of "very poorly done."
- 0 Unaddressed/element omitted.