

Sánchez, Assignment Sheets for English 422: Writing in the Health and Human Sciences

Click on the links below to read my assignment sheets and rubrics for:

[Grant Writing Assignment:](#) Because this class has partnered with various community organizations to produce health information materials, students are asked to conduct *secondary research* on specific health literacy issues call for an intervention. Students write an *annotated bibliography*, a *literature review*, and a *grant* that will go towards the production of their intervention projects.

[Health Information Materials:](#) Students must create a health intervention for our community partner. This project asks them to take usability and design into account. Students learn to use image manipulation and desktop publishing software to complete their projects and then user-test and focus group their projects to revise them.

[Disability Maps:](#) As students will be working with diverse clients, we explore the implications of disabling structures. Students map their spatial practices on campus and then are asked to “re-experience” space through the lens of a disability, taking note of how the same spaces that they visit on a regular basis are now closed off and limiting to their particular needs.

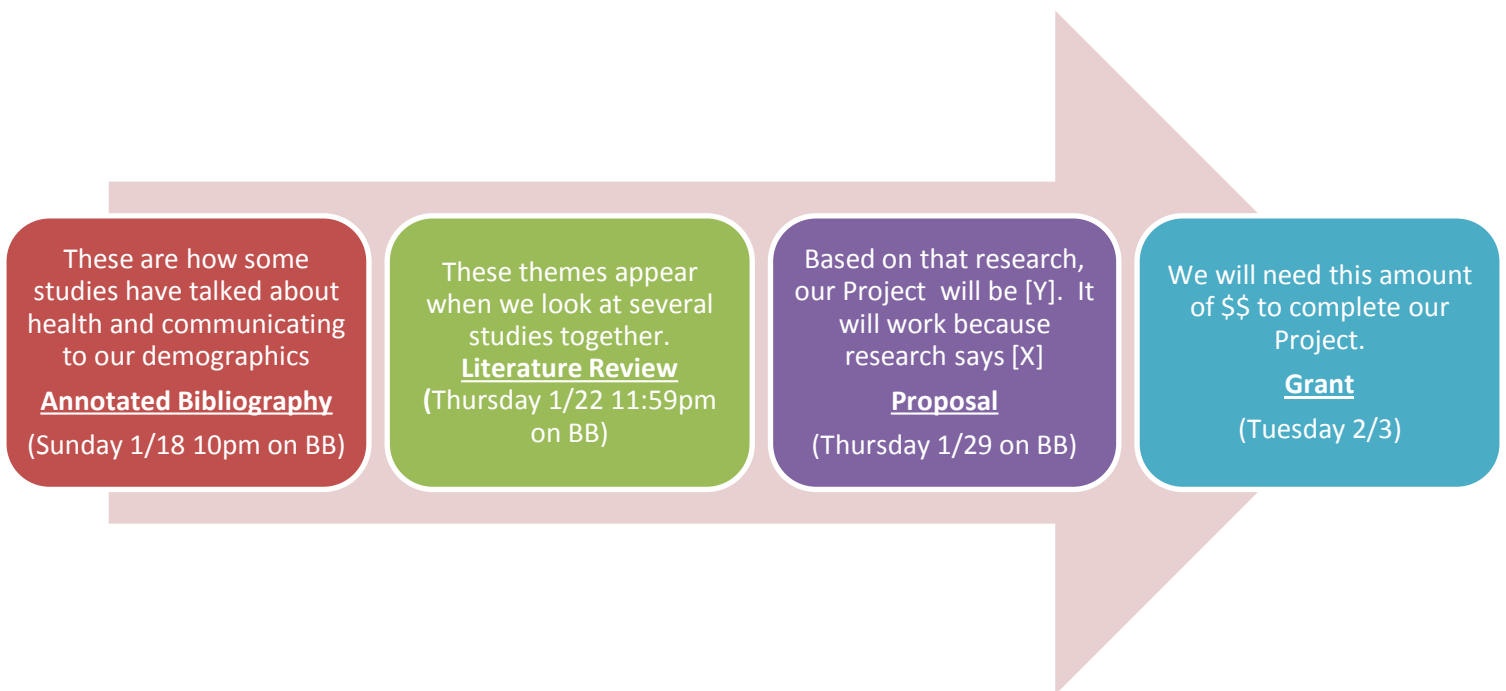
[Narrative Charting Assignment:](#) Students pair up and chart the changes that their partners report in a relationship that is changing. Students learn to write technical documentation that is objective, precise, and client-centered. Over the course of three consultations, we discuss the importance of clear notes and the multiple audiences that need to be taken into account when writing notes in a health setting.

[In-Service Project:](#) Because health settings are always adapting to new policies and new technologies, students need to learn how to communicate important procedural changes to other professionals. In this assignment, students create a presentation and documentation that teach their classmates about the reasons for implementing new processes and tools in the workplace and step-by-step protocols to be in compliance.

Project One: Grant Writing

This project asks you to conduct the necessary steps in order to submit a grant. Because we will be working with a real community partner for Project Two, it makes sense for us to try to obtain real funding by applying for an actual grant. Hence, we will be working in separate groups to submit grant ideas for one of Purdue's Office of Engagement Student Grants. This grant application is due no later than February 3rd and I will discuss this more in depth as we approach the deadline.

However, in order to complete a grant, you must read so that you know what you are talking about before you apply for funding. Ideally, we would first hear from our community partner about their needs but because this grant is due so soon, we will be focusing more on Nursing and Personal Care populations at large and less on the specific demographic and needs of our community partner. That will be the focus of Project Two. Follow these steps to complete the grant successfully (Remember that you can work ahead of schedule if you need to):



Annotated Bibliography (15 points):

Individually, you will find **at least 1** popular source and 2 scholarly sources and write an annotation for each. You must follow the annotation conventions as described on the Purdue Owl for each. We will discuss how to find credible sources in class but in general, these sources should:

- Focus on common Health recommendations for Nursing and Personal Care populations.
- Focus on Communicating Health Information to Nursing and Personal Care populations.
- Be technical books or articles in journal publications (again, avoid popular sources).

Your goal is to have a list of scholarly sources that give you an idea of what health information our community partner's clients need to know about **AND** how to communicate this information to them. You can search for articles on Purdue's libraries website--- <https://www.lib.purdue.edu/> --- just make

sure that you are finding **scholarly articles that are peer reviewed**. Also note, that unless you make a good case, **all of your articles should be recent (within the last ten years)**.

Literature Review (50 points):

Based on your interests and the work that you have looked into, I will put you into balanced groups. I will ask that you start to explain to each other the themes that you found in your annotations and to combine these points visually on a map. Then, you will start writing a literature review, in which you identify these themes through words and text. Hint: if you need help on identifying what literature reviews look like, consult the OWL **and** look at how the scholarly sources you found for your annotated bibliographies start. These should all review the scholarship up to this point. Remember that your Literature Review should be in APA or MLA citation style. You cannot combine styles. Lastly, please do not write a chronological review of your literature. You can of course, first find themes and then put your lit review in chronological order within those themes.

Proposal (65 points):

After you have compiled a literature review, you will get together in your groups and write a short, **one to two page, single spaced** proposal that outlines what your idea for your project is. Please have the following sections: Description of the Problem; Proposed Solution; Budget. Proposals are persuasive in that they give reasons why a particular idea should be funded or a certain action should take place. That said, you should base your persuasiveness on the research that you have done on your community partner and on Nursing and Personal Care populations. Try to identify what needs exist and how could they be met? What could you make that these clients would latch on to? Write a proposal that cites the literature and gives a rationale for why you think this idea would work. You will have all of class time to work on this. This proposal should also include a budget of what you will need to purchase. Please note: **I do not want you to simply buy items; rather, I want you to make, write, design, something and then use the funding to obtain copies of it.**

Grant:

One person in each group will be the contact person for submitting the Service Learning Grant to Purdue's Office of Engagement (this is done online). You can request money (up to \$1500.00 to help you obtain the materials that you want to make for our community partner's clients (prototypes, final deliverables). You just can't use the funding to hire someone or pay stipends. The Grant asks you to fill in some information, including a description of the project AND an itemized list of what you will need. You should start creating this on a Word Doc as soon as you turn in your proposal to me, but you can wait to submit the actual grant until Tuesday's class (February 3) if you would like for me to give you some feedback on it before you submit it.

Link to the Grant -- <https://slg.engagement.purdue.edu/>

Grading:

The individual Annotated Bibliography will be graded on punctuality, grammar, citation style, and effort.

The Literature Review and the Proposal will have their own Rubrics found below.

Literature Review Rubric

Grammar, Mechanics, etc	Style (Citation and Professional statements)	Synthesis (Sentence and Idea flow)	Comprehensiveness (Ideas are fully fleshed out)	Content (is appropriate and well explained)
5—the writers follow academic and professional grammatical constructions;	10—Citation style is clear; also, the writers use a professional tone without sounding like robots. That is, the vocabulary and constructions they use can be understood by lay people and professionals.	15—the ideas flow well from one to another. There is a clear connection for ideas being presented this way; there is an effective use of transitions	10—The writers have fully explored the ideas of the studies they discuss without spending too much time on one study. The studies support the themes.	10-All of the articles are appropriate
4	8	12	8	8
3	6	9	6	6
2	4	6	4	4
1—the writing suffers from many unusual or not professionally accepted grammatical choices.	2-- The writers' style is lacking an attention to audience. The writers may over rely on phrases that obscure their meaning or conversely, may be too conversational in their style. There is inconsistency in their citation style.	3—the ideas don't seem to be fully connected. They are interesting but their relationship seems muddled.	2—There is not enough discussion to support the themes that the writers identify. Or, too much time is spent on one article instead of developing a comprehensive discussion of the body of work as a whole.	2-only a few of the articles seem relevant.

Proposal Rubric

Grammar, Mechanics, etc	Style (Citation and Professional statements)	Synthesis (Sentence and Idea flow)	Description of the Problem (writers identify a problem and give a potential solution)	Goals (what the writer propose to make or design)	Evidence (is appropriate and well explained)	Sections (are clear and easy to read)
10—the writers follow academic and	10—Citation style is clear; also, the writers use a professional	15—the ideas flow well from one to another. There is a clear connection for	5—The writers discuss a real need that exists in this population.	10—the writers are clear about their intervention and how it relates to the problem; it is also	10-The writers justify why they believe their ideas will work. The arguments are	5—the writers have the appropriate

professional grammatical constructions ;	tone without sounding like robots. That is, the vocabulary and constructions they use can be understood by lay people and professionals .	ideas being presented this way; there is an effective use of transitions		well thought out and realistic.	convincing.	sections; each
8	8	12	4		8	3—the proposal contains correct sections which are easy to read
6	6	9	3		6	
4	4	6	2		4	
2—the writing suffers from many unusual or not professionally accepted grammatical choices.	2-- The writers' style is lacking an attention to audience. The writers may over rely on phrases that obscure their meaning or conversely, may be too conversational in their style. There is inconsistency in their citation style.	3—the ideas don't seem to be fully connected. They are interesting but their relationship seems muddled.	1—The writers' discussion of the problem seems off the mark or not very in line with what the community partner's documents seem to convey.	2—the intervention needs to be more fully developed before its appropriateness can be assessed. Or the intervention may not be realistically implemented.	2—the writers do not provide sufficient textual evidence (or the appropriate kind of evidence that makes it clear why their solution would be effective).	0—there are inconsistencies and errors with the sections.

Project Two: Health Information Materials

In this project we will incorporate visual design principles in order to design usable health information materials. As one of the course goals is to familiarize ourselves with documentation and communication technologies, I will also ask that whatever you make also be designed with Adobe InDesign. You will have 1 day to play with InDesign in class (2/17), one day to learn about InDesign in class (2/19) and three days to create and revise your designs in class (2/24 OR 2/26 AND 3/3 and 3/5); I expect you to work as needed outside of class.



User Testing

Phase One: We will draft an email to our community partner asking them for a meeting to go through our ideas with them. I will allow you to use classtime on 2/24 or 2/26 (but not both days) to complete this. If it is not possible for the community partner to meet during this time with all groups, you will need to schedule something outside of class. *note that only one or two people from the group need to go; the remainder will work on InDesign in class*

Phase Two: Using this feedback, we will design a prototype of the health information materials in InDesign. Because I expect groups to work on different timetables, each group should schedule an *individual* time to meet with our Community Partner outside of class before 3/12.

Memos (15 points each)

Each memo asks you to give an account of the relevant details of your interaction with your community partner; what topics were discussed; whom did you meet with, how did this conversation shape your thoughts for this project; what concerns do you have? and so forth. In other words, what do I need to know as someone who might not have been there and how does this impact your progress?

In addition to following the format for Memos, be sure that you are clear with your purpose, that your language is clear, and that your tone is confident (please see the Olu and OWL readings)

This memo will be graded using the following rubric:

- 14-15 points: the writers follow a proper format for memos and most importantly, the document subscribes to “HTML” principles. The tone of the document is also appropriate (purpose, clarity, confidence).
- 12-13 points: the document mostly conforms to the proper Memo format, but is missing some aspects; the document is mostly readable, as the writers have implemented several (or most) “HTML” guidelines.
- 11 points: the writers produce an average memo that is readable, but does not take full advantage of the proper tone.
- 10 or below: the writers’ memo has a few problems with tone or format that prevent it from successfully communicating information.

Final Deliverables (50 points)

The due date for the final product will depend on several factors—the most important of which will be whether we receive grant funding or not. If we do not receive grant funding, prototypes will be due earlier (perhaps the week after spring break). If we do receive grant funding, it will take considerable time for the funds to be allocated to our account and for our orders to ship. **Expect the timeline for this project to be undefined. We will most likely begin our next project in the middle of this one and/or add more mini assignments before the Final Deliverables are due.**

Regardless, the final product for this project will be graded using the following criteria

- **Appropriateness of the tone (friendly, professional, engaging, etc)**
- **Readability in terms of “HTML” design choices**
- **Grammar, syntax, professionalism**
- **Appropriate choice of colors and contrast**
- **Creativity**

Final Report

Remember that one of the stipulations of your Grant is that you must turn in a Final Report to the Granting Agency. This is due **prior** to the last week of classes, but you may submit it at **any point** after you turn in your deliverables. Like the Grant proposal that you submitted, this is ungraded, but I would be happy to look it over for you before you submit it. **The person who submitted the grant should look at the email s/he received from the granting agency and download the attached report form.**

Project Two: Disability Maps

This activity, adapted from Brooke and McIntosh's "Deep Maps" exercise * will ask us to create visual representations of the spaces that we inhabit. The first map will be a personal representation; the second will remap campus from the perspective of disabilities. We will then gain experience applying for grants related to disability studies.

Phase One:

On a large sheet of paper, draw a map of campus that is rich with places and pathways you inhabit today. In particular, pay attention to the places that you normally reside in, locations of important people who are important to you, commonly traveled routes, bike or walking trails, parks, locations on campus, sites where memorable events occurred, favorite places, businesses you frequent, bodies of water, landmarks, other geographic elements. **You will have to differentiate these different types of movement and places as best as you can.**

Above all, this map must make sense to you. Don't worry about accurate measurements, but do try to make your map proportionally consistent. The rest of us should be able to make sense of your map's scale. Also consider the scope of the map. Is the place you currently inhabit concentrated in one area of Purdue? Does it extend beyond campus into West Lafayette or Lafayette? You might also draw one or two detailed inset maps of areas that deserve mapping out in more detail. Or, you might draw a locator inset map that positions your local map within some geographically larger area.

Phase Two:

You should also make a key. This key should be (1) a visual representation attached or included on your map and (2) a narrative that answers these questions:

- a) What images/locations feature most prominently on your map? What is the centermost "thing on your map? What is at the edges?
- b) What people or groups of people do you associate different locations on your map?
- c) What plants and animals inhabit your map (if any—don't just add them if they don't matter)?
- d) What places do you walk, ride or drive by regularly? How did you represent these places? Why?
- e) What places do you walk, ride or drive by regularly but never enter (indoor and outdoor places)?
- f) Who does *not* inhabit your map?
- g) What is *not* on your map?
- h) How would you describe the place in which you live to others?
- i) What would you title your map?

Deep Map and Key worth 50 points.

Phase Three:

Once we have mapped our campus, we will “re-see” campus through disabilities. I will ask you to get into groups and then

- 1) Have each groupmember pick a disability
- 2) Create a list of places on campus that people might go through and to
- 3) Come up with a representative key for safe and unsafe spaces
- 4) Walk through campus (together during class) from the perspective of someone with that disability in mind as you walk, enter, and inhabit your spaces.
- 5) Create a rough draft of a map as you walk through these spaces and some notes on what you found and didn't find
- 6) Walk again through these spaces on your own when there are more people (between classes) and add to the map—again sketch a map and some descriptions that people with that disability should know.
- 7) Your final draft of the Disability map and Key descriptions should have information on safe and unsafe paths and locations on campus based on your experiences. **You will be presenting this information to strangers so make sure that you are professional and thorough.** If you have trouble getting started, just ask yourself, **“what did I learn?” to start and go from there.**

Disability Map and Key worth 50 points

Phase Four: Grant Proposals: Due Week Thirteen

From these experiences, we will search for and practice applying for grants that deal with disability research. You may also apply for implementing disability projects, but these are much more difficult. You will also write an annotated bibliography to familiarize yourself with the latest research on disability studies. These can be from any field—not strictly hard sciences.

Grant Proposal and Annotated Bibliography worth 100 points

Phase Five: Poster Presentation During the Writing Showcase

On Wednesday, April 16th, the Professional Writing Program will have its Writing Showcase. We will submit group posters as a class and I will ask you to devote some time between 10-3 [room TBD] to explaining your maps to visitors. I would like at least one person from your group to be there. [note: let me know if you would prefer to present your patient information materials instead].

*Brooke, Robert and Jason McIntosh. “Deep Maps.” *Locations of Composition*. Christopher J. Keller and Christian R. Weisser (eds.) SUNY.

Project Four: Narrative Charting

Worth 75 pts (3 case notes @ 25pts each; if we have more case notes, they will be at the same point value). We will also come up with an initial assessment/intake in groups and as a class for 10 supplementary points based on completeness.

Guidelines

This project asks you to document and closely monitor an ongoing relationship between a classmate and someone important to them that is changing. We will be delving into a very specific area of healthcare and charting in a very specific style. Because we lack any medical equipment, we must use mental health structures to learn how to write case notes. We will also be writing SOAP notes; many of you will not have to write a SOAP note again after this class. However, what you *will* have to do repeatedly as you meet with clients, regardless of notation style, is to communicate specifically what occurred during a health session.

For this assignment, you will be put into pairs, where you will play the role of client and then a health practitioner/consultant (or vice versa). The purpose of this assignment is two-fold. Firstly, it will allow you to become more familiar with the practices of charting on a regular basis. Secondly, it will allow you to finely tune your observation and interviewing skills to determine what actually makes it into a chart. While it is the practitioner's role to elicit as much information as s/he can in ten minutes, it is the client's job to have something to discuss for at least that long. [in other words, I won't accept hearing, "we're done" before the end of the time allotted]. Please make sure to be in class these days. If you miss class, it is your responsibility to contact your partners and work something out with them (and me for submitting the work on time).

Note two things:

- 1) In the role of the client, I ask that you choose something pertaining to an ongoing relationship to discuss on a regular basis with your classmate. This could be something that is happening with your family; something that might be happening with your pet; difficulty with a mentor, and so forth. It is up to you to pick something that is important enough for you to keep wanting to discuss, but low-key enough that it doesn't overwhelm you or your health practitioner. **Your homework assignments will include, in part, making progress on your goal as a client before the next session.**
- 2) Depending on class size, you may not have the same partner for both your client and as your practitioner. That is, you may end up being the health practitioner for one peer, but being a different peer's client.

Initial Assessment/Intake and Informed Consent

The initial assessment is a record of your first interactions with a subject. It uses detailed, objective language to take a snapshot of the subject's current condition. In medicine, this typically includes data

such as sex, age, circumstances of your interaction (how the subject came to be in your care), and current mental, physical, and emotional condition.

For the purposes of this project, we will develop this initial assessment together before you try it on your client. Although you should probably avoid asking questions that are too personal for the assessment, you should design an intake that will act as a springboard for what information you want to track regarding an important relationship that is changing for the client. Ideally, you should get information about their activities that change on a daily or weekly basis. You must identify a main relationship problem or concern (the main diagnosis) that the subject is working toward improving on his or her own in the coming weeks through a care plan with measurable goals.

You should also include an Informed Consent

Case Notes*

Case notes presume reader familiarity with the initial assessment and provide updates and status changes resulting from regular interactions with the subject. Every such note addresses the main diagnosis and care plan in some way, even if this means noting that no change has occurred. For this project, you will meet your subject and discuss the relationship in question several times a week. Any advice or questions that you pose to the subject should be documented in these notes. **Important: I expect you to take notes during these sessions; these are *your personal* notes (not Case Notes). Write your Case Notes after the session; do not try to write a Case Note while you are speaking with the client.**

Project Breakdown

Initial Assessment/Intake and Informed Consent (10 pts)

Each Case Note (25 pts)

Both the initial and all subsequent documents will be graded on clarity, use of objective language, and inclusion of relevant detail. All documents must be delivered by the due date listed above and addenda may be added at any time previous to this date. However, no document may be revised in any way after its initial composition, and any addenda to these documents must include the date and substance of that alteration (i.e. what you changed) to the document in question. (see the rubric below for more information)

A Reiteration of Caution: Please remember that this project is **not about providing counseling help**. Rather, this is about helping us gain experience with writing health-related information. Do not feel as though you must fix any problems that your client raises. You are only documenting. Conversely, you as the client must choose a topic that you are comfortable discussing for two weeks AND which might **change on a daily basis**, otherwise this project will not work. You may elect to make up a scenario but in

my experience this is a little harder to pull off and complicates the assignment somewhat. (If you decide to create a fictitious scenario do not tell your partner, but you must let me know).

Rubric (and the % each feature is worth in each case note)

Different agencies have different values when it comes to note-taking. Imagine that the organization that you are working for values the following:

Clear understanding of the different sections of a note (20%): For example, in SOAP, you should have a clear understanding of what the difference between the subjective and objective sections is.

Precise Writing (20%): you should be clear about who did what when and use evidence to support your claims. Instead of writing “CL was tired during the session”, you must be explicit about whether this is something that the Client reported or if you are making a supposition based on what you have observed. A few areas to watch out for include

- **Clarify pronouns:** For instance, it is hard to separate the subjects of these sentences-- “CL stated that his father was in town; CL report that he frequently ignores what he says whenever they are together.”
- **Avoid Colloquialisms:** “Her eyes literally brightened up at the mention of her girlfriend.”
- **Include Evidence with your Assertions:** The claim “The client was upset.” Is meaningless without any evidence to back it up. What did you hear or see to make you think this?
- **Use details:** You should rely on direct quotes and thick descriptions when necessary. “The client was late again. He said it would not happen again.”
- **Use correct words:** The use of proper words can be crucial in your notes because people will scrutinize everything. For example, saying that the “CL was literally going to beat the competition” implies more than you may want it to. Or, writing “We will hone in on the CL’s strengths for the next few sessions” when you mean “home in” can also be problematic.

Unbiased language (20%): it can be tempting to take a position based on what the CL reports. Avoid as much as possible taking one side or another. That way, your plan, for example, won’t read like the following: “At the next session, we will discuss methods to help the CL’s roommate get his act together.” Aside from being way too colloquial, this also makes it clear that you have taken a side in whatever struggle the client is involved in. This can cause problems down the line. Biased language can also take other forms like “the Client was shy.” You have no basis for this and even if you were to include evidence such as, “he did not talk very much” that does not mean that he was shy, necessarily.

Client-Centered Language (20%): Avoid making the notes about you. Note the difference between the following sentences:

- “At first I wasn’t sure what I should ask the client, but then I remembered about the ladder of abstraction, and thought that this would be a great way to get her to open up.”

- *“The client was quiet during our first few minutes. When asked about the events of her day, she reported that she had received a frustrating phone call from her son’s school.”* [in fact, the italicized part would only be necessary to report if it was unusual in some way].

An exception here is when you report on your interventions and what you actually did or what you plan to do (as in the Plan section)

Concise Writing (20%): The different audiences that read your notes do not have time to go through immense details. Get to the point quickly. Yes, this is in direct contradiction to the “Use Details” section above, but you will need to master how to find an appropriate balance. Going back to the example above, “CL was late again,” notice what will happen if we add these details:

“This was the third Tuesday that the CL has arrived at least five minutes late. The first Tuesday he arrived 5 minutes late, the second Tuesday he was 10 minutes late, and today he was 5 minutes late. He arrived perspiring somewhat and out of breath because, he reported, that the bus was late. I let him know that if he was late again, he would have to seek a new provider. The CL slouched and his eyes seemed to sadden after being told this news, He was “sorry” and that “it would never happen again”.

Project Four: In-Service (85 points)

Imagine that you are charged with finding ways to make your company or place of employment more efficient or health conscious. This project asks you to develop materials that communicate a change in health policy for different audiences. This project has a few steps, which I outline below:

Part One: Research (5 points)

1. Think of **one** possible topic in your field that interests you.
2. Find **two recent** scholarly articles and **two recent** popular articles that do **two** things. They must:
 - a. Raise questions or concerns about the ways that your field currently does something related to that topic *and*
 - b. Propose solutions for a better way of doing it.

This could be proposing a new way of performing a procedure; asking to bring in funds for “better” equipment; and so forth. Feel free to ask your instructors for help.

3. You will submit a short paragraph to me detailing your interest and how you might go about completing this project. Please also list your sources in APA or MLA style. (5 points)

Part Two: Packet of Materials (50 points)

1. You will then create a packet of materials that propose a new policy for your (imagined) workplace based on your research. If you can connect this to where you currently work/have worked in the past, that’s even better.
2. You should have the following information, which you would present to people who work in your organization during a meeting:
 - a. Information about how the current policy is problematic according to new research
 - b. Highlights of the changes to the policy
 - c. **Instructions of how individuals in the organization can comply with the new policy**
 - d. Details of best practices going forward
 - e. A list of references and resources that individuals can consult for more information

Remember to use what you have learned about CRAP and HATS and about clear language in this project.

Part Three: Letters (10 points each for 30 points)

1. Think of three (3) different audiences that would be impacted by your change in policy and write a letter to each one (or if there is a preferred method of communicating to these parties, choose that genre) explaining your rationale for this change in policy, procedures, or instructions. Remember to keep audience in mind as you write each professional communique.

Part Four: Presentation (15 points)

You will work on your Project 3 Materials over Thanksgiving Break. On December 1, please come prepared to give a short presentation on what you are making. Use visuals and slides as necessary. This presentation will be ungraded. We will continue the presentations on Dec 8th and 10th as necessary.

During **Week 16**, You will give a brief 5-10 minute presentation to the class on what the issues are with the old procedures and policies and what the new way of doing things should be (I realize we won't have access to all of the objects you will need, so try to use images to demonstrate your point).

As usual, there may be supplementary points for any additional work not on this sheet. In general I will use the following Rubric

Paragraph of Research

5 points: The paragraph includes a works cited of sources consulted. There is a clear direction.

4 points: The paragraph includes a few items in the Works Cited, but not enough; the direction is vague.

3 points: The paragraph is missing the Works Cited; the direction is mostly clear.

0 points: Any other instances.

Materials

45-50 points: The materials take audience into consideration; the materials are clear; the materials use principles of CRAP and HATS to get the point across; the purpose of these materials is clear.

40-44 points: The materials attempt to take audience into consideration; the materials are mostly clear; the materials use some elements of CRAP and HATS, though others could be implemented.

35-39 points: The materials seem generic and /or vague. They may be visually appealing or not, but more could be done to discuss why this is needed or how a policy would change/be enacted.

30-34 points: The materials are vague, they may lack visual appeal and clarity; the materials lack a concrete purpose. Still, the materials attempt to perform the basic goals of the assignment.

Below 30 points: The materials do not satisfy many of the goals.

Letters

9-10 points: The letters (or more appropriate genres) take audience into consideration and genre conventions. The letters are clearly written.

8 points: The letters (or more appropriate genres) mostly take audience into consideration (perhaps only superficially, but not in content or rhetorical moves). Conventions are mostly satisfied. The clarity is in need of minor revision.

7 points: The letters (or more appropriate genres) look like they are supposed to but the audience awareness piece needs major revision. The clarity is in need of minor revision.

Below 7 points: Both the conventions and the audience awareness are in need of major revision.

Presentations

12-15 points: The presenter clearly demonstrates why a change in policy is necessary. The new procedures are explained carefully. The presenter uses props if necessary.

10-11 points: The presenter does an excellent job presenting, but parts of the presentation may need to be slightly revised. That is, the reason for a change in policy or how this policy will impact the work done at this agency may need to be clarified.

9 points: The presenter explains why the change in policy is needed but it may be unclear how this policy will be enacted. Other aspects of the policy change may be unclear.

Below 9 points: The presenter does a good job presenting the materials but many aspects of the presentation remain unclear.