Handbook I: Module Adaptation

Scientific Writing of e-Learning Modules

26.06.2018

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INTRODUCTION TO THIS HANDBOOK

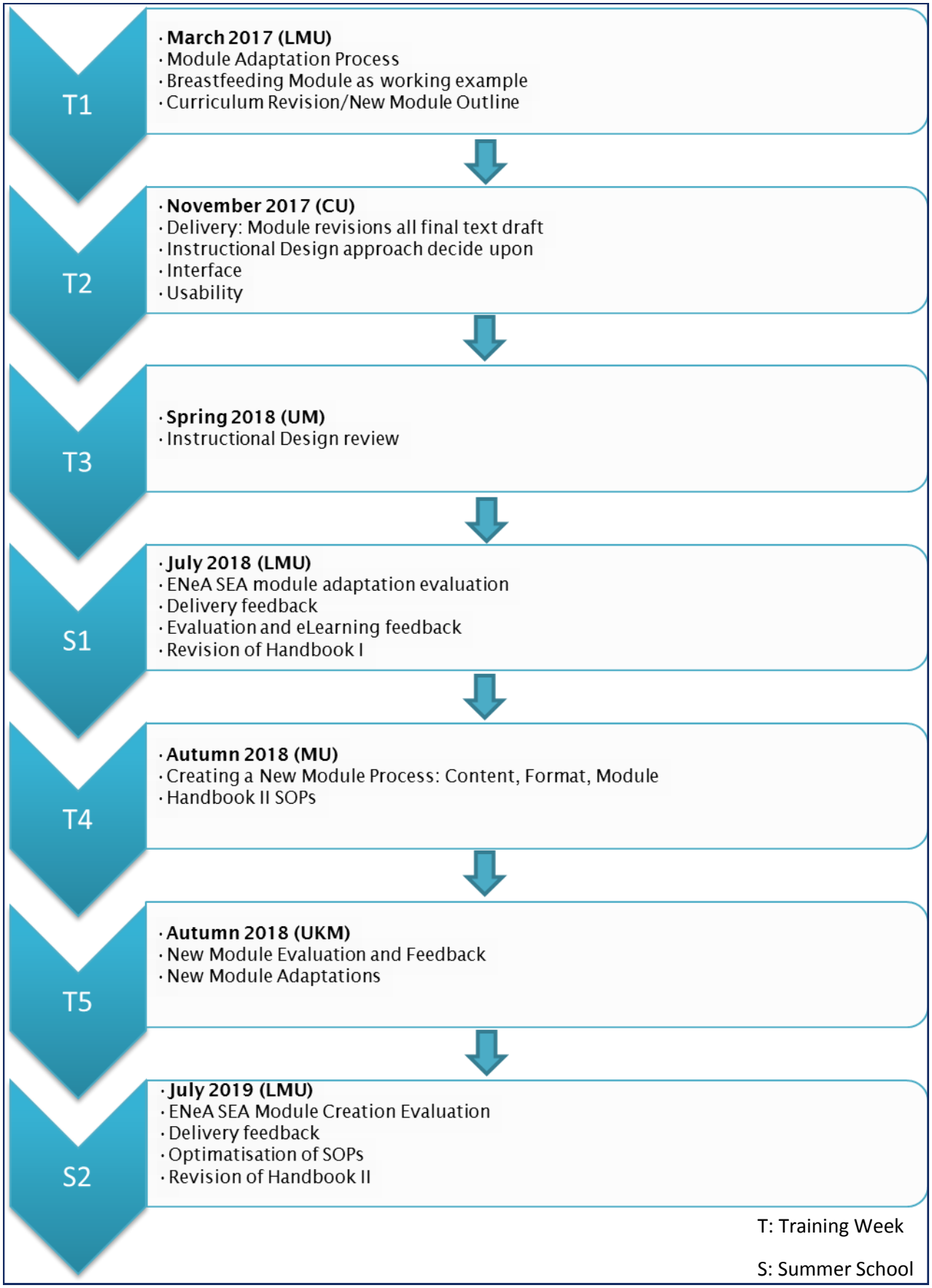
This guide is comprised of three sections:

- A guideline on the writing process: how to begin writing for the adaption of eLearning modules, to create and organise content (part A)
- A guideline on specifications for the creation and organisation of media and technical elements
- A guideline on instructional design approaches to be considered in the creation of eLearning modules

In the appendix you can find templates to use for the content of each module/unit for implementation, as well as templates for the organisation of media elements and quality control procedures

The templates in the appendices are there to be used for the finalisation of the units in preparation for implementation. Please copy the template as often as you need. Inserting **all content** into this format enables implementation to run smoothly.

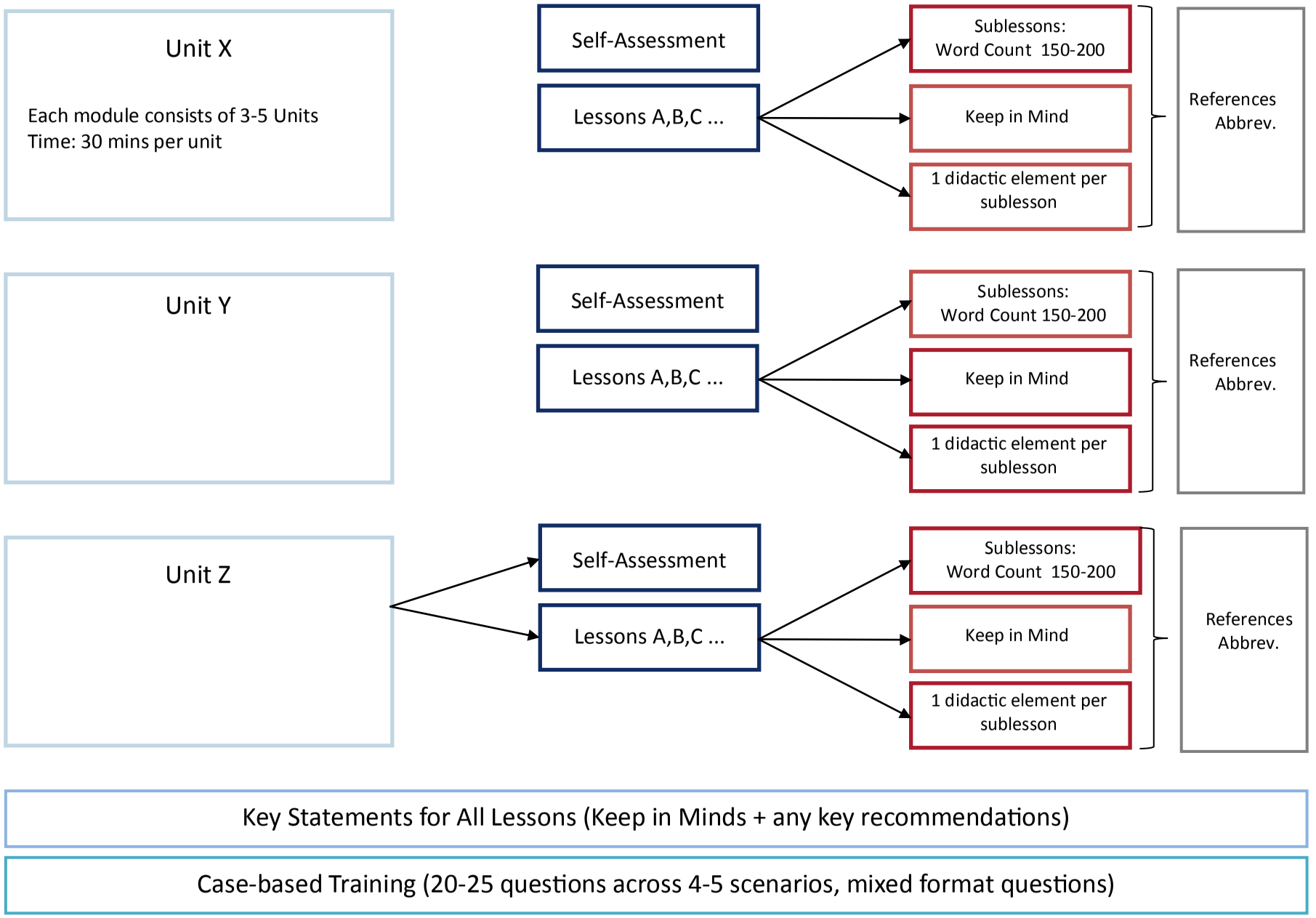
ENeA SEA WP4: Training and Development Process



WRITING MANUAL

This section provides details about the writing of an e-Learning Module

Module Organisation & Content



Writing Aspects: Getting Started

Define the target audience

Helps define the aim and learning outcomes.

It helps choose the level of content to cover.

It helps design the content appropriately.

Style and language needs to be appropriate for the target audience

Contexts/environments

Identify in which context(s)/environment(s) the module is ideally to be used.

Aim and learning outcomes

Roles of the learning outcomes: Should be used to guide the learner, author & re-viewer

Module outcomes: 1 learning outcome per Unit

3 – 4 learning outcomes per unit are recommended.

Learning outcomes should be specific and usable to develop assessment (instructional design, media).

General Writing Aspects: Getting Started

Each module should begin with a short overview of what will be covered and the aims of the module

Apart from the lessons each unit should include:

Introduction (similar to a short abstract)

100-150 words

Identify the target users

Giving an overview of what they will learn in the Unit

Key Statements for All Lessons:

Bullet-points

Are there any key recommendations

Key statements contain the Keep in Minds from each sublesson as well as any additional take home messages

Case-based training and CME questions should directly assess the learning outcomes.

General remarks

- Cross-reference material where possible rather than double-up on ID work (link to other lessons for further information)
- Some inconsistency with English: please use American English
- All recommendations should be presented in a “Recommendations” box of a specific colour as presented in CU’s instructional design concept
- “Key Statements” list: in a box at the end of each unit also in a specific colour (same concept as recommendations)
- Tables and figures need to align with text
- Use animations sparingly and only when absolutely necessary: As a general rule no more than 1 animation style video per unit
- Maximum 2 expert statements per unit
- If text is long – break into subheadings

Formatting

The module must be created using the provided ENeA module creation templates.

Each module unit is organised in a separate template as follows:

- Title page (Module X, Unit X, Status, e.g. draft 1)
- Overview
- Introduction
- Self-assessment
- Lesson 1 (Sub-lessons should be 150-200 words)
- Lesson 2 (Text illustrated with figures, tables, links, videos, etc. where applicable)
- Lesson X (Text illustrated with figures, tables, links, videos, etc. where applicable)
- Key statements
- Abbreviations
- Full list of references
- Scientific author(s) and Reviewer(s) with address and affiliation

Formatting

Each Unit should be 45 minutes in learning time

Aim for 30 minutes duration as a writer (this should hopefully equate to approximately 45 minutes as a user)

1 lesson (150-200 words)

- only key statements/messages
- details made available in further reading
- **weighted importance** should be given to the topic rather than having to keep each lesson the same length (i.e if one topic is more important than the others, this lesson can be longer and the others shorter)

Format of a Case Study

- 1-2 Case Studies per Module
- Present background on the case study
- Present the case
- Give the theorectical underpinning
- Present the solution and how the case was resolved

Case Study Citations

If the entire case study has been written by someone else:

they are referred to as a collaborator

If only the actual case itself has been written by someone else:

They are referred to as the source (e.g. *Source: Personal Communication: B. Koletzko (12.11.2013)*

Figures

- Figure title and legend should be listed below fig.
- Figures should be numbered consecutively in cursive with FULL SOURCE and LINK below (including page no. in original paper).
- When module is delivered please include PDF's for all figures.
- If you would like to adapt/generate a figure please contact ENeA.
- ENeA will request permissions from the copyright holder.
- Figures will be adapted to accommodate ENeA corporate identity.
- ENeA will request permissions from the copyright holder.
- There need to be screenshots for all figures in the Sample Media Catalog
- The graphics files need to be named in the same nomenclature (see file naming convention) as in the word file
- All files for figures have to be sent to LMU

The following page gives examples of how different types of figures should be sourced within a unit:

Example 1

Figure taken directly from a publication

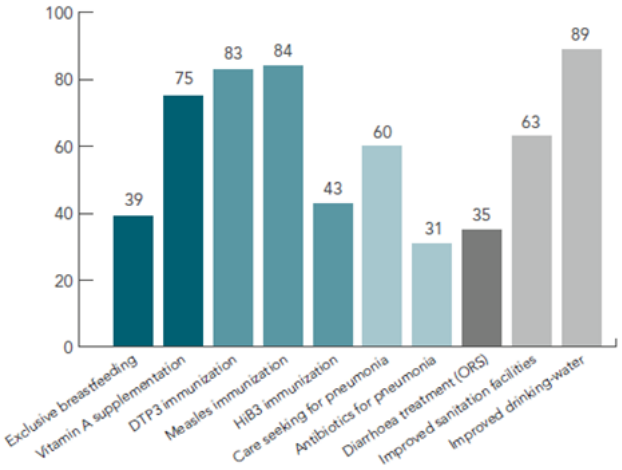


Figure X. Effective intervention methods for prevention and treatment of pneumonia among children under 5 years of age*. % of population currently employing such methods.*

Source: *WHO & UNICEF (2013). Ending preventable child deaths from Pneumonia and Diarrhoea by 2025. Pg5.*

Link: http://www.who.int/maternal_child_adolescent/documents/global_action_plan_pneumonia_diarrhoea/en/

Example 2

Figure created for the module from existing data

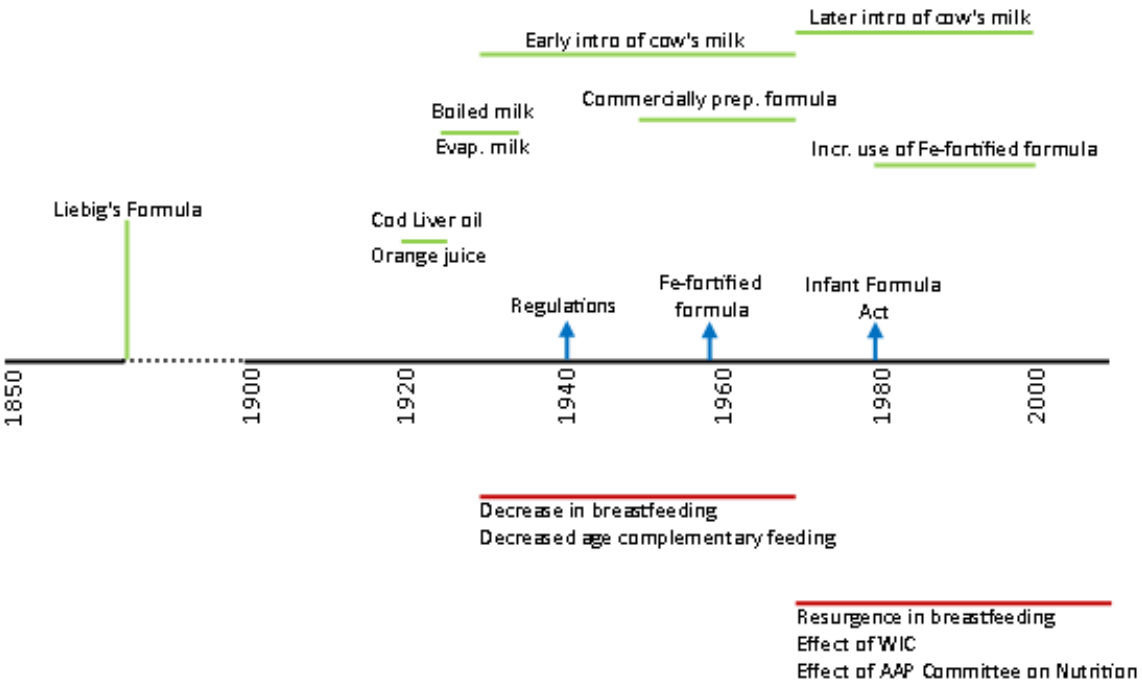


Figure 2: Overview of the Most Significant Impacts, Influences and Trends on Modern Infant Formula Feeding in the US*. Component changes (green), cultural trends (red) and regulatory changes (blue).*

Source: *ENeA own - Figure adapted from (Fomon 2001) – combination of Figs. 1 (p 410S),2 (p 411S) and 7 (p 415S) Fomon, S. J. (2001). "Infant Feeding in the 20th Century: Formula and Beikost." The Journal of Nutrition 131(2): 409S-420S.*

Tables

- Tables should be labelled with title above and full source below.
- Each table should be numbered consecutively in *cursive*
- Tables will be adapted during implementation to the ENeA corporate identity.
- ENeA will request permissions from the copyright holder.
- There need to be screenshots for all tables in the Sample Media Catalog
- The table files need to be named in the same nomenclature (see file naming convention)
- All files for tables have to be sent to LMU

Example:

Table 4. An overview of Implementation of Laws Prohibiting the Advertising of BMS by WHO Member States According to Region. *The figures in brackets represent additional countries that are not WHO Member States.*

Table 3 Prohibition of advertising of BMS by WHO Region (*21*)

WHO Region	Full	Partial	No	No answer/ No information	Total
African	16	0	0	31	47
Americas	12	0	1	22 (3)	35 (3)
Eastern Mediterranean	5	0	1	15 (1)	21 (1)
European	22	4	4	23	53
South-East Asia	6	0	0	5	11
Western Pacific	7 (1)	1	0	19	27 (1)
Total	68 (1)	5	6	115 (4)	194 (5)

Note: The figures in parentheses indicate additional countries or areas that are not WHO Member States.

Source: *WHO 2013, Country implementation of the International Code of Marketing of Breast-milk Substitutes: Status report 2011. Section 2.2.1 Prohibition of advertising and sales promotions of BMS, pg 8:*

Link: *http://www.who.int/nutrition/publications/infantfeeding/statusreport2011/en/*

Graphics

- Writers will be in charge of graphics for their modules
- Graphics should follow the same style and formatting to create a cohesive course for the learners
- A template for the style and formatting of graphics will be created and should be followed

  - Creation of ENeA^{SEA}-own graphics is the responsibility of the partner universities. However, when permissions are required LMU should be contacted to request permission- this is NOT your responsibility- before graphics are created by the partner universities

Additional Didactic Elements

- „Keep in Mind“ boxes: These are short statements written in red at the end of each sub-lesson that highlight the “take home message“.

Example: **Breast milk substitutes are defined by the Codex Alimentarius as infant formula, follow-on formula and formula for special medical purposes.**

⇒ This should follow a set style like the ENeA Global one (see right) so that all keep in minds are easily recognisable

- Authors may also insert the following elements:

  Useful Hint / Recommendation / Note

- Videos and Expert Statements MUST be filmed according to the technical requirements listed in the *Audio/Visual Technical Manual*.

Referencing

- At the beginning of each lesson all relevant ref's should be listed.
- At the end of a unit all ref's from all lessons should be listed **with PubMed ID or DOI where possible**.
- If there is more than paper from the same source in the same year please annotate as a,b c etc. in text and in reference list (WHO 2012a, WHO 2012b)

- Please **do not** use EndNote or another reference manager
- Within text referencing:
  - Single author: (Agostino 2012)
  - Two authors: (James & Lessen 2009)
  - Multiple authors: (Jones et al. 2011)
- Make sure you correspond 100 % to ethical writing guidelines and remember: self-plagiarism is still plagiarism

http://ori.hhs.gov/avoiding-plagiarism-self-plagiarism-and-other-questionable-writing-practices-guide-ethical-writing

Citations

- Citations should always be placed in citation marks and marked in cursive.
- When longer than 1 line, please indent.

Example:

In 2011 it was shown by Jones that nearly 75% of US children were breastfed, but the vast majority were not breastfed exclusively for six month (Jones et al. 2011).

> *"According to recent estimates from the National Immunization Survey, only 14.1% of children who were born in 2006 were exclusively breastfed for 6 months. [...] estimates of the prevalence of exclusive breastfeeding for 6 months, derived from national survey data, showed disparities according to race, family income, population density in the area of residence, and the mother's age, education level, marital status, and BMI." (Jones et al. 2011)*

Data from the WHO statistics in 2011 indicate somewhat lower values for infants exclusively breast-fed for the first six months of life (WHO 2011).

Additional Module Components

- Aside from the written content of each unit, authors are also responsible for the following didactic content:
  - Self Assessment questions
  - Case-based training (module dependant)
- If you have any questions regarding any of the above material please do not hesitate to contact us.

Self-Assessment Questions

- Self-Assessment: At the beginning of each unit we offer 3-5 background questions on the topic of the Unit to offer learners the chance to test their knowledge
- These should not be too difficult
- The aim of these questions is to focus the learners attention ie. these questions will cover topics discussed in this Unit

Case-Based Training

- This is offered at the end of the completed module and poses patient cases in which participants can test what they have learned
- Questions are based on all topics covered in the module
- There should be a total of 20-25 questions covering 3-4 clinical scenarios

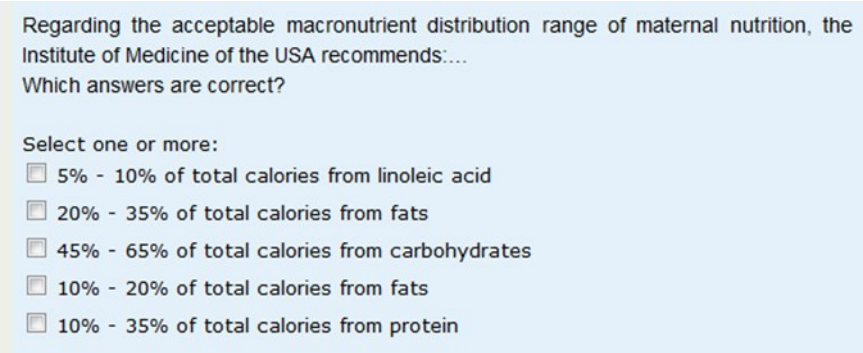
Self-assessment and Case-based Training Questions

For self-assessment and case-based training the following question types are possible:

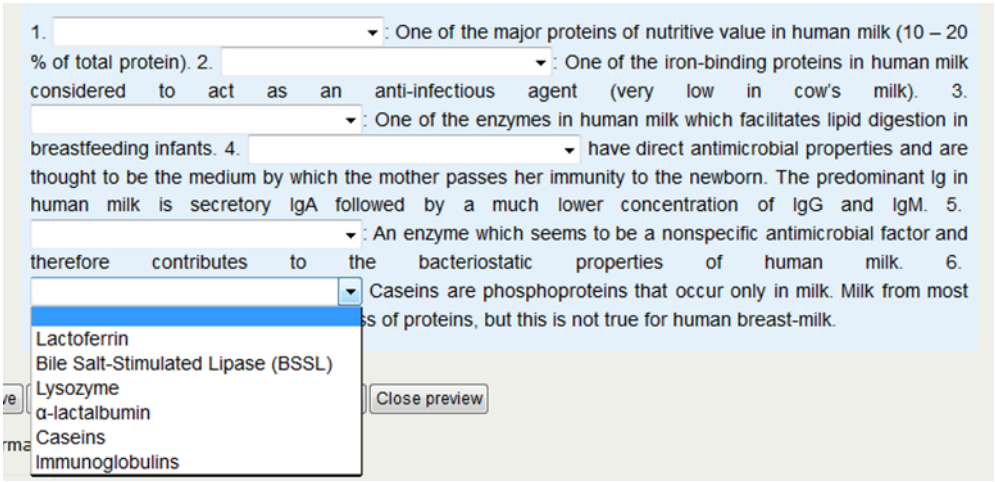
1. **Multiple choice questions**

   a. Single answer (only one answer is correct)

   b. Multiple answers (multiple answers are correct)



2. **Cloze questions** (embedded answers): The user is presented with a text (or sentence) and one or more words have to be filled in from a drop-down menu of different choices. This kind of question is good when the available answers could potentially be used in various sections of the text (or sentences)



2. **Matching question:** Having a question/ answer matched to one keyword

3. **True/false questions**: The participants have to choose if a given statement is true or false

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