

# LOS ANGELES COUNTY COLLEGE OF NURSING AND ALLIED HEALTH

## ANNUAL PROGRAM EVALUATION REPORT

ACADEMIC YEAR: 2016-2017

REPORTING COMMITTEE: School of Nursing

### PART I: EVALUATION OF ANNUAL GOALS AND COLLEGE ASSIGNMENTS AS APPLICABLE

Evaluation of annual goals from the preceding academic year

#### 1. Maintain all course thresholds above 3.5

	FALL 2016		SPRING 2017	
SEM 1	N111 – 4.4	N112 – 4.1	N111 – 4.59	N112 – 4.5
	N113 – 4.15	N113L – 4.64	N113 – 4.57	N113L – 4.75
SEM 2	N121 – 4.23	N122 – 4.31	N121 – 4.07	N122 – 4.38
	N123 – 4.21	N123L – 4.59	N123 – 3.99	N123L – 4.74
	N124 – 4.1	N124L – 4.61	N124 – 4.23	N124L – 4.74
SEM 3	N231 – 4.09	N232 – 3.85	N231 – 4.14	N232 – 3.99
	N233 – 4.13	N233L – 4.36	N233 – 4.08	N233L – 4.54
SEM 4	N242 – 3.97	N243L – 4.11	N242 – 3.82	N243L – 4.14
	N243 – 4.42		N243 – 4.18	

**Goal Met: Overall course ratings were above threshold for Semester 1, 2, 3, & 4.**

- All courses were above established threshold.

#### 2. Implement all recommendations from the Program Review Workshop

##### a. Simulation Lab Preparation During Intersession

- During the summer and winter break 4<sup>th</sup> semester uses this time to prepare for their MOCK Code Simulation that is done the 3<sup>rd</sup> or 4<sup>th</sup> week of the semester. Other semesters spend time over summer break working on new simulations.

##### b. Clinical Enrichment

- Semester three students were offered the opportunity to participate in a 4-day student clinical experience designed to assist students in critical thinking and clinical reasoning in the summers of 2016 and 2017 and the winter of 2016. The program received favorable feedback from the students and it was suggested that it be offered to all students in all semesters. However, due to a lack of adequate faculty availability it was not possible to ensure that each semester could participate. Recommendation: If the enrichment session could not be offered for each semester then it would not be offered until there was adequate faculty. This can be revisited in the next academic year with the hiring of more faculty.
- Semester four conducted a 5-day remediation for students that were unsuccessful in their clinical course, students returning that have been out of

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the clinical setting longer than six months, and students administratively withdrawn from a medical-surgical theory course or clinical course.

- Students utilized the skills lab for a total of 1309 times to increase or improve their ability to refine skills that would improve patient safety and outcomes.

### c. Student Success Workshops

- Stress management: Study and Test Taking Strategies and Stress Management classes were offered to incoming students but not as a workshop.
- The IV Therapy clinical session for the LVN 125 Transition course was offered to the generic students as a success workshop. There were 45 students signed up in 2016 and 48 students in 2017, and the informal feedback was very positive. The SON will continue to offer the students the IV therapy clinical session as a student success workshop in the summer. We also opened the Fluid and Electrolyte class to the generic students and had 26 sign up. They also had very positive feedback. Faculty will continue this practice every summer and add the Nursing process class also.
- The following student success workshops were a success with survey score above threshold will continue to be offered during fall 2017 semester: post-partum hemorrhage, health literacy, focused assessment, critical thinking, jigsaw, Medical Spanish, and IV race (IV tubing set up).
- The APA workshop will continue to be offered to all students in addition to the mandatory APA information that is covered by each semester in lectures. All faculty are encouraged to participate in the APA workshop to ensure further equal standardization of the rubric/grading style.

### d. Evaluate the use of simulation as a student success workshop activity.

- The Student Success Workshop Committee continued to offer several workshops to supplement the curriculum and assist students in successfully meeting learning outcomes. Anonymous surveys were given just following each workshop. The following workshops were offered: One-minute Simulation, and Joint Commission Simulation: Inspector in the House (cancelled due to just one student signing up). All feedback received via Class Climate surveys far exceeded a threshold of 3.5.

### e. APA Papers

- Faculty met to assess progression from a simple paper in semester one and increasing slightly each semester to a more complex paper in semester four. Faculty created a standardized guide to APA format and gave it to all students. Rubrics and the length for the various assignments were all very different however. The plan is to adjust the assignments to comply with the idea of simple to complex in fall 2017.

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## **Implementation of recommendation to and from Committees/other Programs including status:**

### **Curriculum Committee**

#### **Quality and Safety Education for Nurses (QSEN)**

- Curriculum, in collaboration with the entire faculty, revised all course objectives and Clinical Performance Evaluation Summary objectives reflecting incorporation of QSEN competencies. In spring 2017, semester 1 incorporated the revised course objectives in N113 and N113L and Clinical Performance Evaluation Summary. Semester 1 and 2 will incorporate the revised course objectives in all their courses in fall 2017. This project has continued throughout the 2016-2017 academic year with the goal of all semesters incorporating the revised course objectives by fall 2018.

#### **Content mapping**

- Curriculum Committee also completed Content Mapping and sent it to Content Experts for review to ensure all required content is covered throughout the curriculum and without repetition from semester to semester.

## **Admission and Promotion (A & P)**

### **Inter-committee communications (ICC)**

- ICC was sent from A & P Committee to Semester Coordinators to discuss with the semester group's feedback regarding permitting students to audit a nursing course that the student had successfully challenged for credit. Semester responses varied with two semesters in favor of auditing as it enhances and supports student learning and outcomes, and two semesters against auditing. This issue was presented at Faculty Organization Committee meeting with a vote against allowing auditing at SON.
- ICC was sent from M. Caballero, Dean, Administrative and Student Services, requesting committee review of the point system and minimum admission requirements. The committee was asked to consider raising the grade point average (GPA) requirement of both the overall GPA and the science pre-requisite courses to decrease the applicant pool. Committee response: The Committee agreed with and also recommended to the faculty the suggestion to increase the overall GPA from 2.0 to 2.5 and the GPA of science prerequisite courses from 2.0 to 3.0. A & P presented this change to the Faculty Organization Committee and it was approved to be implementation in spring 2018.
- The TEAS cut score was looked at to determine if it should be increased from 64.7. It was decided not to change it at this time. The A & P committee was tasked with following a sample of students and gathering data to see if raising the cut score caused any kind of change. This committee will be ready to report the outcome of this research at the Program Workshop, summer 2018.

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## Report on functions

1. Maintained a relationship with the administrative structure of the College by participating in governance meetings and discussing school accomplishments and program needs.
  - In November of 2016, the College acquired a new Provost with an extensive background in nursing, management, and education. The provost has instituted many changes including reorganization of the leadership structure making the college a more efficient learning and working environment. The changes and reassignments of faculty to the various College and SON committees are to ensure the best use of the time and talent of the staff to promote accountability and decision making.
2. Maintained formal and informal communication between local, state, regional agencies and cooperating institutions and their representatives.
  - Maintained a partnership with California State University ADN to BSN Collaboration for community college students enrolled in the Los Angeles County program.
    - The Dean of Student Services evaluated possible candidates for their eligibility to participate in the program.
    - Five students are set to graduate from the 2016 cohort.
    - There were eight students and five alternates recommended for the summer of 2017 cohort.
    - A date is scheduled for fall 2017 for the coordinator of the CSULA ADN to BSN Collaboration to come and speak with interested students.
3. Promoted an effective decision-making process with regard to planning, implementing, and evaluating educational policies. This can be done by allowing for expression and exchange of opinions and information by faculty at all Faculty Organization meetings and by maintaining an open door policy.
  - The Faculty Organization provides the framework for the governance of the educational program through its committees. The committee approved SON policies and course/curriculum revisions. The faculty assessed and discussed data indicative of student achievement during the Admission & Promotion and Curriculum Committee meetings. These findings are reported throughout the year in the monthly Faculty Organization meetings. All faculty members have the opportunity to discuss the data, interventions, and evaluations and give their input.
  - The SON conducts an annual Program Review Workshop that provides faculty with opportunities to discuss key issues that arose during the academic year and plan program improvements for the coming year. The workshop provides an opportunity for open communication, consensus building, and accountability in evaluation of student learning/achievement, curriculum, policy review, faculty learning needs, and developing improvement plans through the use of program data. This event ensures faculty consensus in the ongoing efforts of the SON to improve the

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effectiveness of the program in order to achieve student learning and program outcomes. The SON continues to encourage student engagement in program evaluation through participation in governance, surveys, and interviews.

Outcome: All faculty members had the opportunity to contribute to program improvement and the decision-making processes.

### PART II: STUDENT PERFORMANCE EVALUATION

#### Student related problems

Discuss any issues relating to Complaints, Petitions, Grievances, Withdrawals, Dismissals, Failures, and any others as applicable.

There were a total of ten Petitions for the AY: 2016-2017

2016-2017	Semester 1	Semester 2	Semester 3	Semester 4	N125
<b>Petition</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>
<b>Preliminary Hearing</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grievance</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

- There were a total of ten petitions filed, between semesters one, two and three during this academic year. The petitions requested pertained to:
  1. Waving the 10% make-up examination deduction
  2. Request for a make-up exam after taking the regularly scheduled exam
  3. Attendance policy waved
  4. Re-take clinical competency
  
- Students have the right to due process in cases where disputes arise which are not able to be resolved in an informal manner. In such cases, the student may opt to file a formal petition. All petitions were resolved in the informal stage with zero petitions moving to grievance in the academic year 2016-2017.
  
- The changes are not significant when compared to the last four academic years. The numbers remain consistently below threshold of 5%.

Student issues related to admissions, promotions and graduation. See chart below.

Overall Course Attrition Rate	Fall 2016	Spring 2017
Semester 1	12.96%	7.84%
Semester 2	9.76%	13.5%
Semester 3	9.62%	6.98%
Semester 4	13.21%	16.98%

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Semester 1 had a decrease in attrition by 5.09% percent from fall 2016 to spring 2017.  
Semester 2 had an increase in attrition by 3.74% percent from fall 2016 to spring 2017.  
Semester 3 had a decrease in attrition by 2.64% percent from fall 2016 to spring 2017.  
Semester 4 had an increase in attrition by 3.77% percent from fall 2016 to spring 2017.

- The semesters use the results to plan goals and interventions geared to improve the student learning outcomes. The course coordinator generates the Student Status Report every semester which provides information on the students' standing in individual courses and semesters. The report provides data on course attrition, retention, and reasons for attrition. The semesters use these findings to establish and plan goals to improve student learning outcomes.
- Remediation plans (tutoring, skills lab referrals, and advisement) are implemented based on student needs and data collected.
- The results of attrition and retention are reported throughout the year during the SON and College Committee meetings. An annual report is then given to the faculty during the Annual Program Review Workshop.

### **Faculty/staff intervention to improve student learning:**

All semester intervened to improve student success.

Student representatives on the Curriculum Committee brought forth concerns, challenges, and feedback from their class for discussion. The student representatives shared the committee's discussions with their respective peers. Any concerns or challenges that needed to be further discussed at the semester level were addressed using the Intercommittee Communication form. The findings and/or solutions were followed up and communicated back to the students during the monthly meetings. The following topics were brought forth by the student representatives:

- Semester two expressed that the lectures had heavy content and it was difficult for them to find balance between lectures and exams. They also felt like they were behind on their required reading.
- Semester two reported that the last exams on Maternal/Child and Medical/Surgical were difficult and not fully covered in lecture, but the test items were included in their chapter readings and handouts. It was also reported that the students did not have enough time to read the assigned chapters and haven't taken advantage of tutoring. Faculty suggested the students read all assigned chapters, review tests, and attend tutoring in order to be successful with their exams.
- Semester three felt like they were anxious about the written and skills competencies.

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- Semester three stated the medical-surgical clinical group in spring 2017 was stressed out trying to balance clinical care plans and study for their theory courses. They felt they were having difficulty managing time with no time for a break. Curriculum faculty member suggested the students discuss these concerns with their clinical instructors so their clinical instructors could help guide them and also to use the organization plans within their clinical worksheets.
- Semester three verbalized concerns regarding the limited number of exams in N232 Professional Role Course (2 exams, no quizzes). They believe that only having two exams in the course increases their risk for failure. This concern was brought forth to the third semester faculty. However, they decided to keep the same grading criteria for now since historically, students have had 100% pass rate on N232. Furthermore, with the exams and quizzes from the other 2 theory courses that are taken concurrently with N232, it will be more challenging for the students to keep up with all the quizzes and exams that they have to study.
- Semester four reported that the students were apprehensive and stressed about their written clinical competency scheduled a week prior to their graduation in spring 2017. Students were concerned about potential failure. Fourth semester faculty committee members answered student concerns by explaining that all lectures had to be completed before the written clinical competency since all content could be included in the exam. Moving the written competency schedule earlier to week 16 could cause more stress to the students because it is the same week that the Professional Role final exam is scheduled.

### Interventions

- Each faculty continuously provides students with services such as tutoring and counseling to assist the students in achieving their educational goals. Each instructor has posted office hours to accommodate students with concerns such as: academic assistance, test review, counseling, referrals and student remediation. Many instructors provide students with their personal cell phone number as well as email for use in case a student may need to reach an instructor during nonscheduled office hours.
- Each semester committee has a method for identifying high risk students and provides them with alternative teaching methodologies to enhance their attainment of their educational goals. Starting fall 2017, the semester coordinators will be implementing a tracking system that identifies “high risk” students and tracks them throughout the program. This tracking system will identify resources offered/utilized by the student to support their success.
- Collaboration between semester instructors and the skills lab coordinator was ongoing for student remediation. In order to assist the students to be successful they put together clinical scenarios that were utilized for Simulation Clinical Experiences.

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- Standardization of clinical worksheets and nursing care plan presentations was done in a classroom setting to maximize students' understanding of the guidelines and rubric criteria of the written assignments.
- Faculty worked with students with personal issues that impacted their ability to be academically successful and referrals were made to the Dean of Student services for any additional help.
- The Student Success Workshop Committee continued to offer several workshops to supplement the curriculum and assist students in successfully meeting the learning outcomes. Student Success Workshops are offered to all students on a sign up basis. The purpose of the Student Workshops is to promote student success in the nursing program and in turn decrease attrition rates. Those workshops are in high demand and may be offered again at a later date to accommodate students who were unable to attend due to high attendance. The following workshops were offered: One-minute Simulation, Postpartum Hemorrhage, Health Literacy, Jigsaw Puzzle, and IV Race. The Study and Test-taking Strategies and the Stress Management workshops were offered to incoming students during registration week. All feedback received via Class Climate surveys far exceeded the threshold of 3.5. The goal for fall 2017 was to reinstate the Clinical Spanish, Clinical Reasoning and add an APA workshop along with the above mentioned workshops.
- Semesters two provides a remediation plan specific to each student that comes back to repeat the semester for any reason. Semesters three and four provide a mandatory remediation/readmission plan for students who are returning to their perspective semesters after previous course failure, previous withdrawal due to below average academic performance, and missing periods of course work/clinical time greater than one semester. The remediation/readmission plan is implemented in order to help refresh the student's skills and to assist the student in regaining/rebuilding their confidence in the clinical setting. Results of student's evaluation of the remediation/readmission plan were positive and students voiced gratitude for the opportunity to have been able to participate in the remediation/readmission.
- Semester coordinators are available to students who may be unable to find a resolution to a problem with individual instructors. The Dean of Student Services and the Dean of the School of Nursing are also available by appointment to assist students with a variety of services including special needs requests, mental health counseling and other referrals on an individual basis.



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## PART III: PROGRAM PERFORMANCE EVALUATION

**Problems experienced/changes relating to courses/service /structure/process:** (e.g. with content, scheduling, location, staffing, materials, class cancellations, policy changes etc.):

### Need for Technology

- Shadow Health Digital Clinical Experiences (DCE) web based assignments were implemented for the first time in fall 2015. For the last three semester student comments for these assignments have been both positive and negative. Some of the positive comments were about reinforcement of learning physical assessment, cardiovascular and respiratory concept labs. Negative comments included, time-consuming, unrealistic, limited vocabulary, requires syntax to get responses, frustrating, and complex navigation. These comments were presented and addressed in faculty workshop. Strategies that were proposed included provision of clearer information and expectations on DCE assignments during course orientation and modification of the list of assignments for fall 2016. However, this did not resolve the recurring negative feedback of students. Semester one instructors did not observe any significant improvement in the assessment skills of students for the past four semesters since the implementation of DCE. Faculty Organization approved the decision to discontinue the DCE assignments and delete Shadow Health from Semester one booklist.
- Semester two continued to utilize Shadow Health in the Pediatric rotation in place of a Nursing Care Plan. Students did not have specific comments made in Class Climate on the spring 2017 evaluation regarding Shadow Health. Semester two Pediatric Nursing Instructors have noticed an improvement in their clinical health histories. Students were more detailed and clear with their clinical health histories.
- Semesters three and four never used Shadow Health as they felt the scenarios were not complex enough for the students in those semesters. Shadow Health is developing more complex scenarios and improving the product, however the faculty felt it was not of value for our students at this time. The faculty plans to explore other interactive electronic experiences for the students.

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### SON Program Evaluation Survey Results: Classes of 2016-II and 2017-I

#### Effectiveness of curriculum/services rendered:

- Students responded to a variety of questions under each of the following categories and the average of the class responses is indicated in the data below. Overall, the seven program objectives and all items pertaining to theory and clinical teachings were above the 3.5 threshold.

Categories	2016-II	2017-I
1. Demonstrates awareness and respect to diverse values and beliefs	4.67	4.45
2. Formulates patient care decisions using critical thinking skills based upon pattern recognition with innovative, appropriate responses for effective planning, delivery, and evaluation of care	4.68	4.43
3. Applies the nursing process for patients with simple to complex health problems to achieve optimal wellness in health care settings	4.74	4.49
4. Collaborates with individuals, families, groups, community, colleagues and members of other health care disciplines to achieve cost effective and quality outcomes	4.77	4.46
5. Demonstrates accountability as a member of a discipline for practicing nursing within legal, ethical, and professional standards as a contributing member of society	4.74	4.46
6. Utilizes patient education as a primary, secondary, and/or tertiary activity to promote self-managed health care	4.69	4.36
7. Communicates effectively and appropriately when interacting with individuals, families, groups and communities in the practice of nursing	4.72	4.39

- This data can be used to attest to the effectiveness of the School of Nursing curriculum in producing a graduate prepared to practice in the community.
- Surveys scored high above threshold across the program objectives. Financial Aid Staff were well appreciated.
- Overall student feedback was enthusiastic and favorable regarding their clinical experiences as providing diverse clinical cases with great direction from instructors throughout the curriculum.
- Based on the program survey data the faculty believes that the curriculum met the School of Nursing and the College mission and the needs of the community we serve.
- The student pass rate, student survey comments, and course content was appropriate and met student learning outcomes. Concerns and issues regarding areas for improvement have been forwarded to administration via discussion and the SLO reports.

#### Class 2017-I NCLEX Pass Rate

- The NCLEX first time pass rate is 93%.

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**Policies & Protocols:** All approved policies for the academic year were reviewed and revised.

All faculty are members of standing committees that review policies and procedures for the college. Policies are reviewed every three years and updated for the School. Once revised, information was discussed in the Faculty Organization meeting, approved and forwarded to the planning committee for approval.

<b>ADMISSION &amp; PROMOTION</b>	<b>CURRICULUM</b>
<ul style="list-style-type: none"> <li>• Policy #830 – Student Grievance</li> <li>• Policy #710 – Nursing Course Exemption/Challenge</li> <li>• Policy #210 – Academic Honesty and Professional Conduct</li> <li>• Policy #820 – Academic Failure and Withdrawal</li> <li>• A &amp; P Bylaws</li> <li>• Reviewed College Strategic Plan</li> </ul>	<ul style="list-style-type: none"> <li>• SON Conceptual Framework</li> <li>• SON Philosophy</li> <li>• SON Philosophy Diagram</li> <li>• Academic Honesty &amp; Professional Conduct-Student Agreement Form</li> <li>• Clinical Evaluation Tool</li> <li>• School of Nursing Bylaws</li> <li>• Academic Dishonesty/Professional Misconduct Report</li> <li>• Policy #201 – Academic Honesty and Professional Conduct</li> <li>• Policy #561 – Impaired Student</li> <li>• Policy #630 – Testing Procedure</li> <li>• Policy #810 – Make Up Exam</li> <li>• Policy #700 – Curriculum Changes</li> </ul>

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## PART IV: PROGRAM STATUS AND RECOMMENDATION

### Accomplishments of the Program:

- There was an overall decrease in student attrition rates for the 2016-2017 AY
- Maintained NCLEX pass rate above the state and national exam scores
- Provided student tutoring
- Implemented the use of a web-based digital clinical experience for semester 1 and 2
- Maintained a collaboration program with California State University Los Angeles for 8-10 students per semester
- Increased the use of the Simulation Lab

### Status to date:

- Continue with student success workshops, critical thinking classes, remediation, tutoring, and extended skills lab hours for competency testing. Statistical data shows a decrease in student attrition rates with an increase in academic grades.
- Support graduates in finding DHS jobs. The school continues to contact graduates for any upcoming recruitment opportunities in the DHS. Faculty actively recommends students for positions in the DHS.
- Notify students of any job fairs or employment opportunities when the SON is contacted by agencies/ health care institutions seeking graduates.
- Continue to interview and hire competent faculty to increase student success.

### Quality improvement plans:

All semester faculty are committed to:

- Maintaining a ParTest bank of questions
- Reviewing all exams two weeks prior to administration
- Following testing and grading policies for all exams
- Content experts continuing to review all exam items for clarity and content
- Continuing to improve online course and graduate surveys
- Providing early intervention for students with an exam score < 70% and unable to meet clinical objectives in the first 4 weeks of their clinical course.

### Goals for upcoming academic year:

- Maintain all course thresholds above 3.5
- Implement all recommendations from the Program Review Workshop
- Prepare and participate in the 2018 BRN accreditation visit
- Prepare and participate in the 2019 ACCJC-WASC accreditation visit

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## PART V: ACCOMPLISHMENTS TO THE 2013-2016 STRATEGIC PLAN

- IE.1: Recruit and maintain a diverse student body, faculty and staff
- Attended student recruitment activities
  - Added student activity photos to website
- IIA.1: Implement increased use of technology in teaching and learning
- Increased the number of simulation lab experiences with High Fidelity Manikin
- IIB.1: Increase the availability of clinical success plans
- Improved the student remediation plan to 1:1 instructor/student time. A four to five-day clinical remediation is now done in semester 3 & 4 to enhance student learning and improve student clinical reasoning in preparation for the semester clinical courses.
- IIB.2: Provide student tutoring
- All faculty are engaged in student tutoring at least 6 to 10 hours per week
  - All semester faculty individualized remediation plans and extra tutoring for students in small groups and one on one.
- IIB.4: Implemented methods to improve student on time program completion
- Addition of new classes in student success workshop
  - Early intervention: Mandate tutoring for students that achieve <70% on the first exam
  - Content experts review of all exam content
  - Reviewed student application files by Admission/Promotion committee members.
- IIC.2: Maintain articulation agreements with BSN programs
- Continue articulation agreements with the University of Phoenix, East Los Angeles College, and Glendale College.
  - Continue collaboration with CSULA ADN to BSN
- IID.4: Continue with student and graduate tracking regarding hiring and retention in DHS
- Graduate surveys for 2013 and 2014 were sent
  - Continued to notify graduates when jobs are available in the DHS.
- IIIB&V.C: Identify potential partnerships
- Dean attended conferences and participated in projects as a member of the California Organization of Associate Degree Nursing Program Directors (COADN)
  - Remained on the Scholarship Committee until 2017
- V.C.1: Attend conferences to develop skills necessary to further the objectives of the College
- Faculty attended teaching conferences for QSEN materials
  - Faculty attended educational conferences on the latest teaching methodologies
- V.D.: Track, trend and evaluate student data for comparative studies
- Student data continues to be tracked and used for program improvement and the attainment of resources needed to improve student learning outcomes.

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## **PART VI: CONTRIBUTORS TO REPORT**

**Dean, School of Nursing  
Research Director  
Semester Coordinators  
Faculty**

## **PART VII: DATA SOURCES**

**2013-2016 Strategic Plan  
2016-2017 Program Evaluation Surveys  
2015-2016 Annual Program Evaluation Reports  
Admission and Promotion Committee 2016-2017 ACER  
Curriculum Committee 2016-2017 ACER  
Semester 1 – 2016 – 2017 ACER  
Semester 2 – 2016 – 2017 ACER  
Semester 3 – 2016 – 2017 ACER  
Semester 4 – 2016 – 2017 ACER**